

PayCard Enrollment Form

Cardholder Information:

Primary Cardholder Name: _____

Card Mailing Address: DCCCA, Inc. ATTN Donna Porter, 3312 Clinton Parkway

City: Lawrence **State:** KS **Zip:** 66047

Telephone Number (including area code) _____

Social Security Number _____ **Date of Birth** _____

Cardholder Address _____

City _____ **State** _____ **Zip** _____

First use of card constitutes agreement to the terms and conditions of the Cardholder agreement that is provided with the PayCard, as well as the fees at the bottom of this form.

Federal law, including the USA Patriot Act, requires us to obtain, verify & record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth & other information that will allow us to identify you. We may also ask to see your drivers license or other identifying documents. The information is completely confidential & will not be divulged or used without your permission unless required by law.

- I wish to deposit \$ _____ .00 per pay period or Deposit Entire Net Pay
- I authorize my employer to deposit each pay period my net wages, after deduction for required taxes & withholdings, to the PayCard per my direct deposit instructions above & if necessary, imitate adjustments for credits posted in error.

Signature _____ **Date** _____

Instructions to Employer: Please fax this form to:
PayCard Services Enrollment Processing Center, 866-904-1408.

Attention:
DCCCA, Inc. Donna Porter
3312 Clinton Parkway
Lawrence, KS 66047

INTERNAL USE ONLY: Routing/Transit Number: 091000022

PayCard Account Number 5 1 0 8 4 3 0 3 5 8

Transaction Fees:		
Service	Fee	Items Covered
Free Services	\$0	Purchases & cash back at POS, Internet statements & balance inquires, transactions inquires, customer services.
Electronic Transactions	\$0.50	ATM inquiries & declines, balances or transfers using the automated phone system, internet transfers, electronic transfers from your account your card.
ATM Withdrawal	\$1.50	Domestic ATM Withdrawals. No additional surcharge at MoneyPass ATMs.
Live Operator	\$2.00	Balance inquiries and transfers
Optional Transactions	\$4.00	International ATM withdrawals, branch cash advances, replacement cards, paper statements, check issuance, account dormancy.

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CDF2: DCCCA