Please fill out each box with all the information. Excluding information will delay the process of receiving your PayCard.

Thank you for your cooperation.

mank you for your cooperation.		
Employee Information		
First Name:		Last Name:
Physical Address:		
City:		State / Zip:
-		
Home or Cell Phone:		Work Phone:
HOHE OF CERTIONE.		Work Fliorie.
Social Security #:		Date of Birth:
I hereby authorize my employer to initiate credit entries (deposits) and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my PayCard account. This authorization will remain in effect until cancelled by me with written notification to		
my employer.		
To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and 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, and other information that will allow us to identify you. We may also ask		
to see your driver's license or other identifying documents.		
		_
Signature:		Date:
Company Name:		PNW Company Number :
		(if you don't know Co. #, please leave blank)
PayCard Fee Schedule Highlights		
Free Services \$0 Purchases & cash back at POS, Internet statements & balance inquires, one free		DOS Internet etatemente 8 halance inquires, one free
Free Services 50	branch cash withdrawal per	r pay period, customer service. Text message and email
	alerts. ChekToday, phone of	or web. Use surcharge-free Allpoint ATM machines.
ATM Withdrawal \$1.79	5 Allpoint ATM cash withdraw	val
	, p	
Bill Pay Transaction \$1.5	Per transaction or reversal	
Funds Transfer \$1.0	O Card Account to Card Acco	punt
Touting	Otan dand taxt	to from your vivaless coming provides are a section
Texting \$0	Standard text messaging ra	ates from your wireless service provider may apply
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Rates may change; please refer to the schedule of all fees enclosed with your card.