

**HCap Strategies  
PO Box 991  
Mequon, WI 53092-0991**

**Flexible Spending Account  
Direct Deposit Authorization Form**

To setup *Direct Deposit* into your personal checking account for your Flexible Spending Account, please read the reverse side of this form and complete SECTION 1 and SECTION 2. The direct deposit feature is only for checking accounts. Please mail your completed form along with a voided check to HCap Strategies.

TYPE OF TRANSACTION       New       Change       Cancel

**SECTION 1 (TO BE COMPLETED BY EMPLOYEE)**

Employee Name (Last, First, Middle Initial)	Email Address (For HCap Strategies' use only)
Address	Telephone Number (Home) Telephone Number (Work)
City                                  State                                  Zip Code	Employer

**SECTION 2 (FINANCIAL INSTITUTION INFORMATION)**

Name and Address of Financial Institution	Account Type
	Routing Number/Transit Number*
	Checking Account Number*
*Please attach a VOIDED check for verification	

**DEPOSITOR/EMPLOYEE CERTIFICATION**

I certify that I have read and understand the reverse side of this form. In signing this form, I authorize my Flexible Spending Account reimbursements to be sent to the financial institution named in Section 2 to be deposited into the designated checking account.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please keep a copy of this authorization for your records.

**HCAP STRATEGIES  
FLEXIBLE SPENDING ACCOUNT (FSA) REIMBURSEMENT PROGRAM  
TERMS AND CONDITIONS FOR PARTICIPATING IN  
THE FSA DIRECT DEPOSIT**

If you are participating in an FSA, you have the option of having your authorized reimbursements deposited directly into your checking account at your financial institution rather than receiving the payment by mail. The following are the terms and conditions for participating in the Direct Deposit Program. You do not have to participate in the Direct Deposit Program in order to have an FSA.

1. Your financial institution must be a member of an Automated Clearing House (ACH) in order for you to participate in the FSA Direct Deposit Program.
2. You must complete this authorization form to enroll in the FSA Direct Deposit Program. A signed and dated form is required for processing. Once your form is received by HCap Strategies, there may be up to a ten (10) day administrative processing period before the direct deposit will become effective. You will receive checks for any reimbursement claims paid during this period.
3. HCap Strategies will mail a direct deposit statement, a new claim form and return envelope to you each time an electronic transfer is made to your account. The deposit statement will show information on the claim being paid as well as year-to-date information on your flexible spending account. The standard turnaround time for deposit into your account is three (3) business days from the time HCap Strategies transmits the reimbursements. You should verify that the deposit has been made into your account before withdrawing funds.
4. If an electronic transfer is returned to HCap Strategies or for any reason cannot be made to your account, HCap Strategies will investigate the cause and if needed, will issue and mail a reimbursement check to you. You will continue to receive any reimbursements in the form of checks until the problem is corrected.
5. It is your responsibility to notify HCap Strategies immediately of any changes in your account, such as account closure or change in account number. Complete this form indicating that your request is a change, and indicate the new information. There may be up to a ten (10) day processing period before the change is effective. If there is interruption in the direct deposit service, you will receive checks for any reimbursement claims paid during that time.
6. You may cancel your participation in the Direct Deposit Program at any time by completing this form indicating CANCEL. The cancellation will take effect as of the date you indicate or as soon as the form is received and processed by HCap Strategies.
7. HCap Strategies reserves the right to automatically cancel your participation in the Direct Deposit Program upon termination of employment or termination of your flexible spending account.
8. If you re-enroll in the FSA in subsequent years, your direct deposit will remain in effect from one plan year to the next until you cancel.

If you have any questions regarding this form, please call HCap Strategies at 1-800-582-9740; local number in the Milwaukee area: 1-262-238-4000, Monday through Friday 8:00 A.M. to 5:00 P.M. CST.