



REQUEST FORM FOR ADDITIONAL DEBIT CARDS

New cards can also be requested online.

Employer: _____ Date: _____

Employee Name: _____ Social Security Number: _____

Employee Email: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Sets of cards requested (2 per set): _____

I am requesting that another pair of debit cards be issued to me. All transactions associated with my account will be my responsibility to substantiate, if requested by Nyhart. If a transaction is not successfully substantiated within the specified time-frame, then all cards issued for my account will be temporarily deactivated.

The cost for each additional pair of cards is \$10.00. Once the cards are ordered, your account will be charged \$10.00 per set of cards.

If there are any updates to be made to my mailing or email address, it is my responsibility to notify Nyhart as soon as possible.

Employee Signature: _____ Date: _____

Please return the completed form to:

Nyhart
8415 Allison Pointe Boulevard, Suite 300
Indianapolis, IN 46250
Fax: 888-887-9961

FOR NYHART USE ONLY

Amount Enclosed: _____ Date Card Ordered: _____