



**RETAIN A COPY OF THIS FORM  
FOR YOUR RECORDS**

Organization Name: \_\_\_\_\_

Remittance Contact Person: \_\_\_\_\_ Ph# \_\_\_\_\_

***Please check one payment method below for remitting flexible spending plan contributions to the New York Council of Nonprofits, Inc.***

\_\_\_\_\_ **WIRE**

We intend to Wire funds to the Bank of America and \*fax/email flexible spending data directly to NYCON, Inc.

\_\_\_\_\_ **ACH Debit**

We authorize NYCON, Inc. to do an ACH Debit from our account and \*fax/email flexible spending data directly to NYCON, Inc.

\_\_\_\_\_ **ACH Credit**

Facility will do an ACH Credit to NYCON, Inc. account and \*fax/email flexible spending data directly to NYCON, Inc.

***Information you will need for WIRE transfer:***

- New York Council of Nonprofits, Inc. Bank of America Account Number:
  - 483006515844
- New York Council of Nonprofits, Inc. Bank of America ABA Routing Number:
  - 021000322

***Information we will need from you for ACH DEBIT:***

Please complete, sign and return the attached Authorization Agreement for Direct Payments (ACH Debits). We will contact you before we initiate the first ACH Debit from your account. After the first ACH Debit, we will debit your account upon receipt of your flexible spending data.

*If you need to contact our bank for any reason, please call Logan Miller at Bank of America 1-888-852-5000 Ext. 1089.*

*\*fax/email flexible spending data directly to NYCON, Inc. – a payroll by payroll submission of authorization to debit (if applicable) and contribution breakdown spreadsheet are required.*