Broker's enrollment for EFT via PNC Bank

1- Enter your License number (starting with LA or LB without the (-)) in the Payee ID field and select the top most campaign name from the drop down

PNC

ENTER YOUR PAYEE ID

Please enter your Payee ID, if known, and select your campaign then click the Next button to proceed.

| Payee ID: | Enter your License number (Ex: LA111111) |
| Campaign Name: | * June Campaign ▾ |

Next ❯

2- If the information is not auto populated, please enter the information. If the values are auto-populated, please validate and submit.

Note: COMPANY NAME should not exceed 30 characters including spaces

EmblemHealth

BENEFICIARY ENROLLMENT

1 ◦ **2** ◦ **3** ◦ **4** ◦ **5** ◦ **6**

Please provide contact information for the business or individual represented in this enrollment.

Beneficiary Contact Information

Payee ID:	LAEXAMPLE	
Company Name:	* Should not exceed 30 characters	**Should not exceed 30 charated including spaces**
Address Line 1:	*	
Address Line 2:		
City:	*	
Country:	* ▾	
State/Province:	*	
Postal Code:	*	
Phone Number:		
Tax ID:		

* Required Information

Next ❯

3- Enter the correct required fields and submit:

BENEFICIARY ENROLLMENT

| 1 | • | 2 | • | 3 | • | 4 | • | 5 | • | 6 |

⬤ Back

Please provide contact information for the person completing this enrollment.

Enrollee Contact Information

First Name:	*	[ ]
Last Name:	*	[ ]
Title:		[ ]
E-mail:	*	[ ]@[ ].com
Confirm E-mail:	*	[ ]@[ ].com
Phone Number:		[ ]
Fax Number:		[ ]

* Required Information

Next ❯

4- Create username and password for future use:

BENEFICIARY ENROLLMENT

| 1 | • | 2 | • | 3 | • | 4 | • | 5 | • | 6 |

⬤ Back

Please create a unique username and password for accessing Payee Manager.

Login Information

◯ Existing User

⦿ New User

Username:	*	[ ]	(6-50 characters)
Password:	*	[ ]	(6-20 alpha-numeric characters)
Confirm Password:	*	[ ]	
Challenge Question:	*	[⬍]	
Challenge Answer:	*	[ ]	

* Required Information

Next ❯

5- Banking Details:
   a. Enter Bank Account Number
   b. Name on Bank Account (Company's name if Bank account is under a company name)
   c. Click on "Find A Bank"

BENEFICIARY ENROLLMENT

6- Enter your Bank name (For Example: Chase, Bank of America) and Click Search

7- Find bank's routing number and click save.

Search using bank details or an IBAN	
IBAN:	
Or	
Country:	United States
Routing Code/SWIFT:	
Bank Name:	Chase
City:	
Address:	
State/Province:	

Search ❗

Select a bank branch and save.

Select	Bank Name	Address	City	State/Province	Local Bank Routing Code	Bank Routing Code	SWIFT
○	JPMorgan Chase Bank, National Association	39516 N DAISY MOUNTAIN DR	ANTHEM	AZ	122100024	122100024	CHASUS33
○	JPMorgan Chase Bank, National Association	1148 W APACHE TRL	APACHE JUNCTION	AZ	122100024	122100024	CHASUS33
○	JPMorgan Chase Bank, National Association	10675 W INDIAN SCHOOL RD	AVONDALE	AZ	122100024	122100024	CHASUS33
○	JPMorgan Chase Bank, National Association	1545 N DYSART RD	AVONDALE	AZ	322271627	322271627	CHASUS33
○	JPMorgan Chase Bank, National Association	555 W 4TH ST	BENSON	AZ	122100024	122100024	CHASUS33
○	JPMorgan Chase Bank, National Association	1240 S WATSON RD	BUCKEYE	AZ	122100024	122100024	CHASUS33
○	JPMorgan Chase Bank, National Association	402 MONROE AVE	BUCKEYE	AZ	122100024	122100024	CHASUS33
○	JPMorgan Chase Bank, National Association	1465 PALMA WAY	BULLHEAD CITY	AZ	122100024	122100024	CHASUS33
○	JPMorgan Chase Bank, National Association	3699 HWY 95, STE 900	BULLHEAD CITY	AZ	122100024	122100024	CHASUS33
○	JPMorgan Chase Bank, National Association	402 FINNIE FLAT RD	CAMP VERDE	AZ	122100024	122100024	CHASUS33

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Save ❗

Find your bank account's routing number and corresponding Bnk address and "Select"

After selecting, Click "Save

8- Verify the information is populated and accurate

Bank Account Information

Bank Account No.(Including IBAN, Clabe, etc.):	* 1234566788
Bank Account Name:	* EmblemHealth - test
Bank Country:	* United States
Currency:	* USD - U.S. Dollar

Find A Bank ➤

Please use Find a Bank to pre-populate your bank account details.

Enter Bank Manually Details ⊙

Bank Name:	* JPMorgan Chase Bank, National Association
Bank Account Type:	Checking
Bank SWIFT Address:	CHASUS33
Bank Street Address:	402 FINNIE FLAT RD
Bank City:	CAMP VERDE
Bank Province/State:	AZ
Bank Postal/Zip Code:	
SWIFT Branch Details:	

Fastest Electronic Payment	☑ Enabled ○ Preferred form of payment
Bank Routing Code:	122100024
Intermediary Bank	☐ Enabled Details ⊙
Least Cost Electronic Payment	☑ Enabled ◉ Preferred form of payment
Local Bank Routing Code:	122100024

Notification of Electronic Payment Initiation

Pay Alert e-mails are generated when a payment is initiated and allow you to track your payment online at our secure website. Multiple e-mail addresses should be separated by a comma or a semicolon.

Pay Alert E-mail:	*
Language:	* English
Other Information/Notes:	

Remittance Options

Delivery Option:	
Delivery Format:	

* Required Information

Next ➤

After Saving, All the bank information should auto populate

Enter Email for Alerts

Please refer to the next page

9- Drop down on the "Delivery Option"

Remittance Options

Delivery Option:	
Delivery Format:	

* Required Information

Next ➤

10- Select "Email"
   a. Delivery Format: Leave with default selection
   b. Enter your preferred email
   c. Click Next

Remittance Options		
Delivery Option:	Email	⌄
Delivery Format:	* Readable Format (Free Form Remittance)	⌄
Remit Attention:	* Enter your email	
Remit E-mail Address:	* Enter your email	✕

* Required Information

Next ❯

11- Check the box on the bottom:

BENEFICIARY ENROLLMENT

1 • 2 • 3 • 4 • 5 • 6

❮ Back

Please indicate your acceptance of the Western Union Service Agreement, or download for further review.

Service Agreement

You must accept the terms of this agreement before sending the enrollment request.

GlobalPay and Payee Manager Terms and Conditions

Travelex Global Business Payments Inc. offers you access to our website ("Site") on the following terms and conditions.

By selecting 'I ACCEPT' below, you agree to the following terms and conditions.

Background. We are providing access to this Site so that you may manage and update your Payee Data for the purpose of facilitating the receipt of payments from the Payer. All payments from the Payer will be provided through a third party ODFI.

1.   Definitions
As used in these Terms and Conditions, the words "we," "us" and "our" refer to Travelex and the words "you" and "your" refer to Payee.
Originating Depository Financial Institution (ODFI): PNC Bank, National Association
Party or Parties: Individually or collectively, the Payee and/or Travelex.
Payee Data: Payee's banking information and contact details.
Payee Payment(s): The payment(s) initiated by Payer to your Transaction Account.
Payee Profile: Your input of your Payee Data onto the Site shall constitute your Payee Profile.
Payer: The entity that you have authorized to initiate a credit entry to your Transaction Account.
Site: The website, hosted by Travelex, through which Payee accesses its Payee Profile.

Download Agreement

☐ I agree to the Service Agreement and have reviewed the **Online Privacy Statement**.

Submit Enrollment Request ❗

12- **Submit.**