

VOLUNTARY EARNINGS DEDUCTION FORM

Employer Name: _____

Monthly Deduction \$ _____

Employer Fax Number: _____

Term (Months) _____

First Payment Due: _____

I authorize my employer to make deductions from my paycheck to be paid to Nationwide Cassel LLC, 3435 N. Cicero Avenue, Chicago, IL 60641 and applied to my Retail Installment Contract account.

I understand that each pay period's deduction amount will be determined based on the frequency of how often I receive a paycheck. I also understand that depending on how many pay periods are in a particular month, the amount posted to my account may be less than or may exceed my regular monthly installment payment.

I further understand that this Earnings Deduction is **VOLUNTARY AND REVOCABLE** at any time.

I acknowledge receipt of a copy of this Earnings Deduction Form.

By: _____

Date: _____

Printed Name

Signature

Printed Name

Signature



**DO NOT COMPLETE THIS SECTION UNLESS YOU WISH TO REVOKE
(STOP) VOLUNTARY EARNINGS DEDUCTIONS**

I, _____, hereby revoke my authorization for earnings deductions to Nationwide Cassel LLC for account number _____. I have provided my employer a copy of my revocation and no further deductions will be made.

By: _____

Date: _____

Printed Name

Signature

Return this portion to:

**Nationwide Cassel LLC
3435 N. Cicero Avenue
Chicago, IL 60641**