



# Early Allotment Reimbursement

When using myPay to setup a voluntary allotment there is no option to select a start date (which should be the month prior to your first payment due date on your financing contract). Because of this the allotment may begin immediately after submission on the myPay site.

The following procedures are provided to assist Service Members who would like to request reimbursement for an allotment that started early.

## IF FUNDS HAVE NOT YET BEEN RELEASED TO THE LENDER:

1. Immediately contact PBA/Transaction Allotment Inc. at (800) 578-2082. **Service member should contact PBA/TAI on or before the second-to-last business day of the month. Allotted funds are released to the lender on the first business day of the month.**
2. To submit a request for "early allotment" reimbursement from PBA/TAI, please complete the form on the following page and fax it to the number printed on the form. Reimbursement should take place 24-48 hours from when the funds would normally be released to the lender (*not from the time of your request*) by electronic transfer to the account number provided on Early Allotment Reimbursement Form.

## IF FUNDS HAVE BEEN RELEASED TO THE LENDER:

1. Please contact the MILES Quality Assurance Department at (800) 293-2040 for further assistance in requesting reimbursement from your lender. The reimbursement from the lender will be via check. You should verify that your lender has your current and valid mailing address on file by calling the phone number listed on your financing contract. If you elect not to have an early allotment reimbursed, then those funds will be applied to your loan balance as a payment.

# EARLY ALLOTMENT REIMBURSEMENT FORM

Because the allotment system began before intended the undersigned requests those early allotment funds be reimbursed by way of an ACH transfer to the financial institution and account provided below.

-Please Print Legibly-

Name \_\_\_\_\_

SSN \_\_\_\_\_

Bank Payment Amount      \$ \_\_\_\_\_

-Your Personal Banking Information-

Bank/Financial Institution \_\_\_\_\_

Bank Routing # (9 digits) \_\_\_\_\_

Account # \_\_\_\_\_

My signature below confirms my authorization for PBA/Transactional Allotment Inc. to ACH early allotted funds to the above listed bank and account. I have read and understand the Early Allotment Reimbursement Procedures.

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

\_\_\_\_\_  
Printed Name Daytime Phone #

PBA/Transactional Allotment Inc.  
Phone: (800) 578-2082  
Email: [info@pbainsurance.net](mailto:info@pbainsurance.net)  
Fax: (866) 264-6975