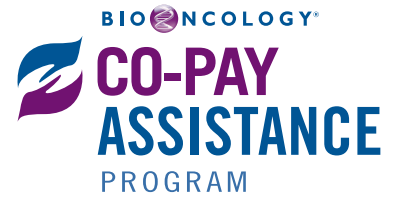


# Electronic Funds Transfer (EFT) Authorization Form

## Genentech BioOncology® Co-pay Assistance Program



To better assist patients who need help covering Commercial Co-pay costs for services received and billed by your office, we have streamlined the ability for your office to receive the Co-pay assistance via EFT. Before you can use this form to request EFT services, your practice must register to use the Genentech BioOncology® Co-pay Assistance Program and have access to the Tool Center at [www.CopayAssistanceNow.com](http://www.CopayAssistanceNow.com). If you have not yet completed this one-time registration, please call the Genentech BioOncology® Co-pay Assistance Program at **(855) MY-COPAY** (855-692-6729).

**This form must be completed in its entirety.**

Health Care Professional/Facility Information		
Primary Physician Name:		
Practice Name:		
Billing Street Address:		
City:	State:	ZIP:
Billing Phone Number:		
Primary Contact's Name (Office Financial Manager):		
Primary Contact's Title:		
Primary Contact's Phone Number:		Primary Contact's Fax Number:
Additional Physician Names:		

Instructions for Requesting EFT Services
<p><b>Your practice must register for this EFT service at <a href="http://www.CopayAssistanceNow.com">www.CopayAssistanceNow.com</a> and provide the required information, including the practice's bank account information.</b> To begin this process, you must first fill out and fax back this form to (833) 307-2195. The total approved amount for each co-pay assistance claim submitted to the Genentech BioOncology® Co-pay Assistance Program will be electronically transferred to the registered bank account. The Genentech BioOncology® Co-pay Assistance Program will notify the practice and the patient each time the card has been funded. The account can be changed at any time by logging on to <a href="http://www.CopayAssistanceNow.com">www.CopayAssistanceNow.com</a> with your practice's account information. When you log on to <a href="http://www.CopayAssistanceNow.com">www.CopayAssistanceNow.com</a>, you will be required to provide your account number, routing number, account type, [business checking, business savings, other, (personal account, etc)], financial institution name, financial institution address, and a scanned copy of a voided check or specification sheet.</p>
Authorization
<p>I hereby attest I am the account holder or authorized designee of the account holder and authorize The Macaluso Group (TMG), on behalf of the Genentech BioOncology® Co-pay Assistance Program, to collect and use these funds for the purpose of making a credit or transferring a payment to said account at the above-named facility. Furthermore, authorization is granted to correct inadvertent duplicate or overpayment transactions. It is acknowledged that neither Genentech USA, TMG, nor their respective affiliates shall be responsible for any delay or loss of funds due to incorrect information submitted by me, any of the authorized representatives on the account or my financial institution. This authorization shall remain effective until notification is provided to TMG [at least ten (10) business days] via an updated EFT Authorization Form.</p>
Authorized Signature:
Printed Name: _____ Date: _____
<b>Your office will be contacted at the phone number provided above within 48 hours of receipt of this fax form.</b>

Confidentiality Notice: The facsimile transmission and accompanying documents contain information that is confidential or privileged. This information is intended for the individual or entity named on this transmission sheet. If you are not the intended recipient, be aware that any disclosure, copying, distribution, or use of the contents of this faxed information is strictly prohibited. If you received this fax in error, please notify us by telephone at (855) 692-6729 so we can arrange for the return of the original documents to us and the retransmission of them to the intended recipient.



100 Passaic Avenue, Suite 245, Fairfield, NJ 07004  
Phone: (855) 692-6729 Fax: (833) 307-2195  
[www.CopayAssistanceNow.com](http://www.CopayAssistanceNow.com)