

Pay Invoice

User Instructions

How to get started

Paying an invoice using the EDPF portal is fast, accurate and easy. First, locate the NCIC Invoice to be paid. The invoice was generated earlier when the user selected the 'Pay Later' option. The invoice contains the invoice number and the IC File number which are both needed to complete the transaction. Note: If you chose the 'Pay Later', you must pay electronically via electronic check or credit card. You cannot pay an E-invoice with a paper check.

Upload Documents

NCIC Invoice

North Carolina Department of Commerce
Industrial Commission
Accounts Receivable Section
4340 Mail Service Center
Raleigh, North Carolina 27699-4340

Billed To:
Niha Test
Niha Firm

Amount Due \$625.00

Date Submitted 01/16/2013

Due Date 01/30/2013

Single Invoice # S-245

Invoice	IC File #	Case	Form	Fee	Transaction #
E-170304	Z55555	JONES MARY FRANCES V. EMPLOYER BBBB	Form 21	\$250.00	2267
E-170305	Z00000	SMITH JOHN ALLEN V. EMPLOYER AAAA	Compromise Settlement Agreement / Clincher	\$375.00	2268


To pay this invoice, visit the North Carolina Industrial Commission web site (www.ic.nc.gov) and click on Pay Invoice in the LINKS menu. Enter the Single Invoice No in the Invoice field and any of the listed IC Numbers in the IC File # field to pay the entire invoice. Enter the e-Invoice number in the Invoice field to pay only that part of this invoice. This invoice must be paid within 10 days.

Exit

Print

Upload More Documents

Access the North Carolina Industrial Commission website at <http://www.ic.nc.gov>. Click on 'Links' and then 'NEW! Pay Online'



NORTH CAROLINA INDUSTRIAL COMMISSION

Help Line: (800) 688-8349, (919) 807-2501, or infospec@ic.nc.gov
Fraud Hotline: (888) 891-4895 or fraudcomplaints@ic.nc.gov

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HOME LATEST NEWS Injured Workers Employers Carriers Attorneys Medical Providers FAQ's SECTIONS LINKS

Welcome to the North Carolina Industrial Commission!



All Across Our State

The Industrial Commission employees administer the Workers' Compensation Act, the Tort Claims Act, the Childhood Vaccine-Related Injury Act, the Law Enforcement Officers', Firemen's, Rescue Squad Workers', and Civil Air Patrol Members' Death Benefit Act, and the Act to Compensate Individuals Erroneously Convicted of Felonies. Our mission is to ensure all parties are treated fairly and equally in accordance with North Carolina State Law.

More...

Click here for the non-Flash version

Injured on

For information that your injury reported, you re health care qu employer can in Compensation

CLICK HERE

Hearing Ca

Click here to vie Training Commissioners' Calendars and the Full Commission Calendars.

Who To Contact

Our Location

NCIC Forms

Information Specialists

News & Events

Database Lookup

Administrators Directory

Court Decisions

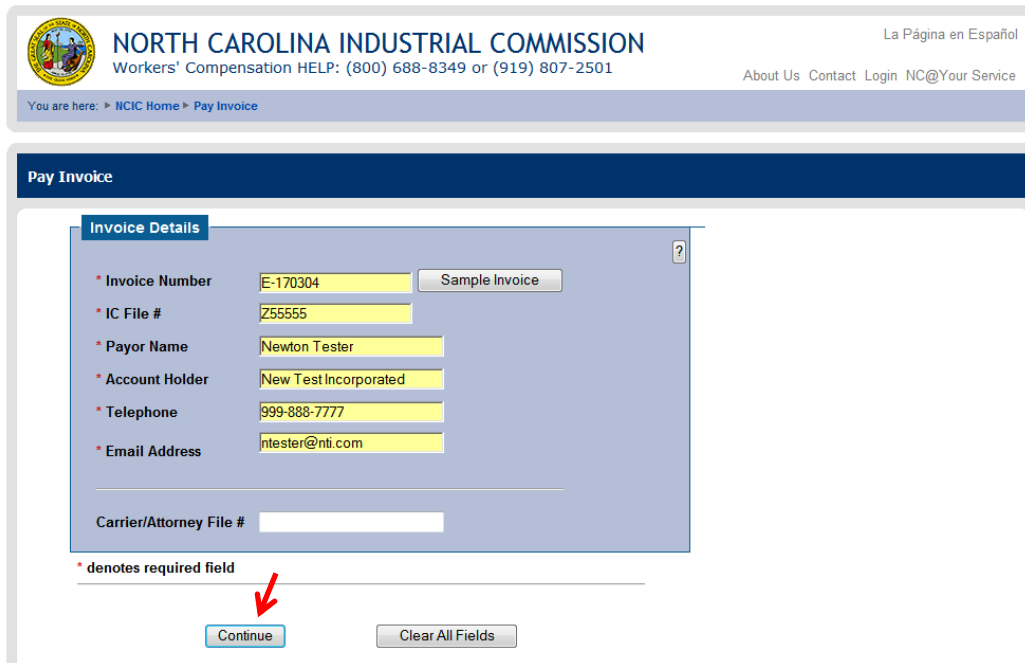
Website Archives

Annual Bulletin

NEW! Pay Online

Complete the required fields

The NCIC Pay Invoice screen appears. Complete all the required fields (* denotes required field). Then click 'Continue'.



NORTH CAROLINA INDUSTRIAL COMMISSION
Workers' Compensation HELP: (800) 688-8349 or (919) 807-2501
La Página en Español
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Pay Invoice

Invoice Details

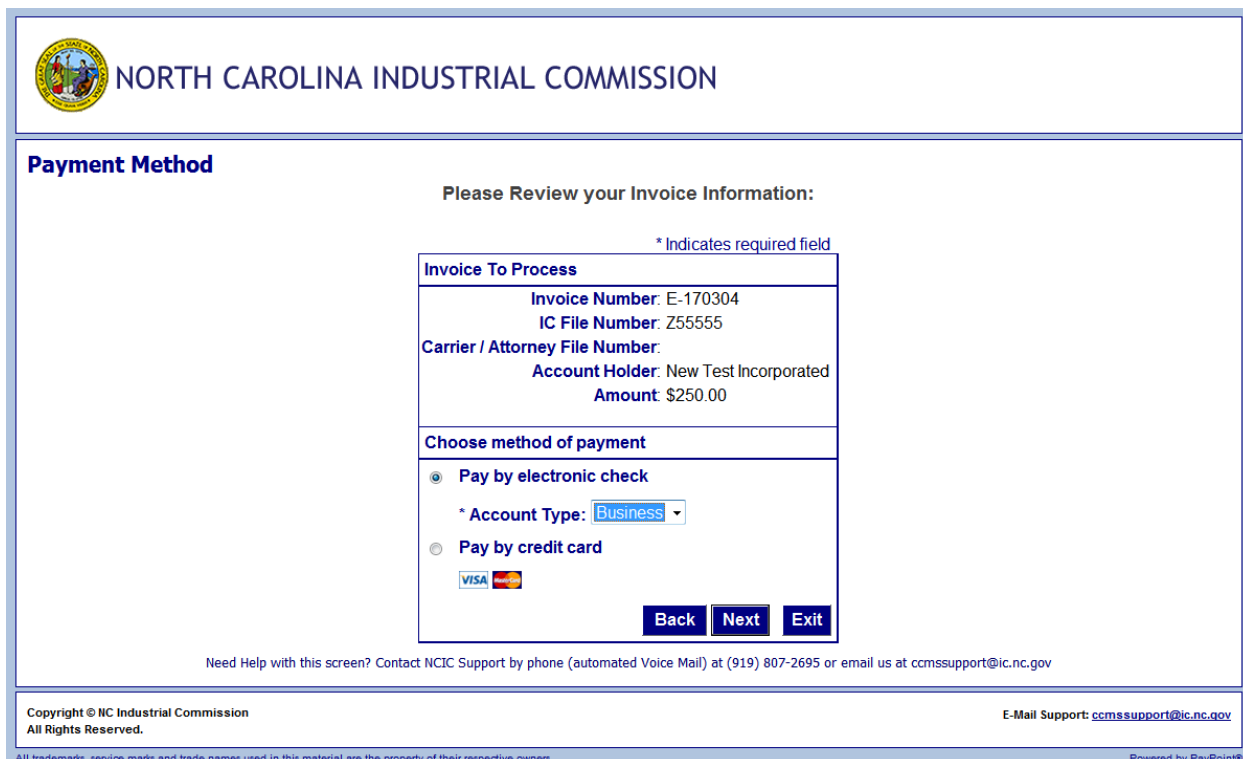
* Invoice Number: E-170304 Sample Invoice
* IC File #: Z55555
* Payor Name: Newton Tester
* Account Holder: New Test Incorporated
* Telephone: 999-888-7777
* Email Address: ntester@nti.com

Carrier/Attorney File #

* denotes required field

Continue Clear All Fields

The payer has the option of selecting 'Pay by Electronic Check' or 'Pay by Credit Card'. In this example, 'Pay by electronic check' will be selected. Choose the 'Pay by electronic check' radio button, and then click 'Next'.



NORTH CAROLINA INDUSTRIAL COMMISSION

Payment Method

Please Review your Invoice Information:

* Indicates required field

Invoice To Process

Invoice Number: E-170304
IC File Number: Z55555
Carrier / Attorney File Number:
Account Holder: New Test Incorporated
Amount: \$250.00

Choose method of payment

☒ Pay by electronic check
* Account Type: Business
☐ Pay by credit card
VISA

Back Next Exit

Need Help with this screen? Contact NCIC Support by phone (automated Voice Mail) at (919) 807-2695 or email us at ccmsupport@ic.nc.gov

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E-Mail Support: ccmsupport@ic.nc.gov

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Powered by PayPoint®

Enter the Payment Information

On the Payment Information screen, enter all the required fields (* denotes required fields). Then click 'Next'

Payment Information

* Indicates required field

Billing Address	
First Name:	<input type="text"/>
MI:	<input type="text"/>
Last Name:	<input type="text"/>
Street Line 1:	<input type="text"/>
Street Line 2:	<input type="text"/>
City:	<input type="text"/>
State:	Select State ▼
Zip:	<input type="text"/>
Phone:	<input type="text"/>
E-Mail:	<input type="text"/>

Payment Details	
*Payment Amount: 250.00 USD	
<small>Your account will be debited in 1 to 2 days from the date identified. If your payment date falls on a non-banking date your payment will be executed on the next available banking day. Current date payments received 4:00 PM EDT will be executed on the next available banking date.</small>	

Payment Method	
*Account Number:	1111111111 What's This?
*Re-Type Account Number:	1111111111
*Routing Number:	121000358 What's This?
*Account Type:	<input checked="" type="radio"/> Checking <input type="radio"/> Savings

Review the Payment Information

Review the payment information. If the payment information has been entered correctly, click 'Pay Now'.

Payment Review

Please review your payment information below and click the "Pay Now" button when ready. If your information is not correct, please click the "Back" button and make any corrections before proceeding.

Address
Billing Address:

Payment Method
Business Check Checking x1111 121000358

Payment Amount
Amount: 250.00 USD
Total: 250.00 USD
By clicking PAY NOW, I authorize my payment to be processed as an electronic funds transfer or draft drawn from my account. If the payment is returned unpaid, I authorize you or your service provider to collect the payment and my state's return item fee by electronic funds transfer(s) or draft (s) drawn from my account.
If this payment is from a corporate account, I make these authorizations as an authorized corporate representative and agree that the entity will be bound by the NACHA Operating Rules. To exit without authorizing, click EXIT.

Need Help with this screen? Contact NCIC by phone (automated Voice Mail) at (919) 807-2695 or email us at ccmssupport@ic.nc.gov

A NCIC Invoice Payment Receipt is generated. The receipt can be printed. The user may then either exit or continue to pay additional receipts.



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Workers' Compensation HELP: (800) 688-8349 or (919) 807-2501

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Pay Invoice

NCIC Invoice Payment Receipt

North Carolina Department of Commerce
Industrial Commission
Accounts Receivable Section
4340 Mail Service Center
Raleigh, North Carolina 27699-4340

Received of:
Newton Tester
New Test Incorporated

Authorization Code 1234 Amount Paid \$250.00
Confirmation # 13012200526406 Date Tendered 01/22/2013
Payment Type E-Check

Invoice	IC File #	Case	Form	Fee	Carrier/Atty File #	Transaction #
E-170304	Z55555	JONES MARY FRANCES V. EMPLOYER BBBBB	Form 21	\$250.00		2267

Your payment has been successfully processed. An Email with the confirmation receipt has been sent to : ntester@nti.com

Exit

Print

Pay Another Invoice

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