

ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION

Complete policy information for all policies to which this authorization will apply:

Policy Number	Insured's Name	Premium Amount	Loan Repayment Amount	Draft Date (01 thru 28 only) <i>for existing/inforce cases only</i>

☐ Check box if address should be changed.**Accountholder Information (please print):****Bank or Credit Union Information:**

Accountholder Name			Bank or Credit Union Name		
Address			Address		
City	State	Zip	City	State	Zip
Phone			Account Number		
Account Type	<input type="checkbox"/> Checking Account (ATTACH VOID CHECK) <i>No starter checks or other cash equivalents can be used</i> <input type="checkbox"/> Saving Account (ATTACH DEPOSIT SLIP)		Bank Routing Number: _____ (the 9-digit number at the bottom of your check)		

Payment Mode: *Please note that all premium payments modes are not available for certain policy types.☐ Monthly☐ Quarterly*☐ Semi-annually*☐ Annually***For New Business Cases:**

If you choose a draft date after the policy date or elect to have a backdated policy there may be additional premium requirements. The Draft Date may be dependent on the Policy Issue Date.

For Existing/Inforce Cases:

Withdraw bank draft on the day of applicable month (01 thru 28 only) as noted above beginning with premium for month of _____. This does not apply to policies that include a Lapse Protection Guarantee (see details on back of form). **If the day selected is more than 15 days after the monthly policy date (day of month the policy was issued), the premium will be required to be paid in advance prior to the monthly policy date.**

Authorization:

I authorize the Company to collect premiums via electronic funds transfer, or to effect a charge by any other commercially accepted practice in connection with the policy(ies)/certificate(s) described above. The attached voided check/withdrawal slip shows the account number from which deductions should be made. This Authorization will apply to any renewal or change later made in the policy/certificate and in no way affects the terms of the policy(ies)/certificate(s) described above.

I authorize the Company to vary the transfer amount without notice in order to maintain the policy in force in accordance with its terms up to a maximum of \$50.00 per plan*, and additionally authorize the Company to increase the amount of the scheduled transfer if over \$50.00 upon my written request. **[*See information on reverse side for premium increases of more than \$50.00 for Term policies]**

If I change my financial institution or my account number, or wish to discontinue this agreement, I agree to give 30 days written notice to the Company. Notice to the financial institution without notice to the Company is not sufficient. The Company may terminate this agreement if any debit is not paid upon presentation, or upon 30 days written notice. The Company assumes no responsibility for bank charges, or, in the case of registered security products, for investment losses on these debits.

Accountholder/Authorized Signature_____
Date_____
Accountholder/Authorized Signature_____
Date**OVER**

Frequently Asked Questions Regarding Electronic Funds Transfers

What is an Electronic Funds Transfer (EFT)?

An Electronic Funds Transfer allows us to automatically deduct your payment from your checking or savings account on a designated date each month. This transaction follows regular bank channels, and is charged to your account just as if you had written a check.

What are the advantages of this payment method?

It's convenient. We prepare the transaction for your premiums as they become due - you do nothing. You also save postage costs because you don't have to mail in your payments.

Can I use the same authorization to pay the premiums on multiple policies?

Yes. Please list all policies on the front of this form.

Can I pay optional premiums via Electronic Funds Transfer?

Yes. You may make deposits to your Universal Life and Variable Universal Life policies, as well as make Dynamic Life pour-ins and optional annuity payments. Just specify the amount that you would like to deposit with each payment.

Can I repay a policy loan via Electronic Funds Transfer?

Yes. We will draft any amount you choose on the mode you select to repay on a policy loan, subject to a \$10 minimum.

How do I make changes in the amount of my transaction?

We will automatically adjust the amount of your transaction due to changes in premiums, up to a maximum of \$50.00. **Term policies may have contractual premium increases that exceed \$50.00 that may be changed automatically.** You will be provided advance notice of premium changes for term policies. You may also instruct us in writing to make changes to your transaction amount. Changes to deposit amounts for Universal Life and Variable Universal Life may require you to provide us with written instructions.

I have a term policy in which my premiums will automatically increase at predetermined times. Do I need to contact you to change my draft amount at these times?

No. If your term policy premiums are structured to increase in certain years, your draft amount will automatically increase to the amount specified in your policy contract **that may exceed a \$50.00 increase.** You will be provided advance notice of premium changes for term policies and it will not be necessary for you to contact us.

What if I wish to use my credit union or savings account?

We can draft from statement savings accounts and credit unions, however an additional 11 business days are needed from our processing date for electronic verification through your banking institution. It is important that you speak with your financial institution first, and provide us with the ACH account and routing numbers for your account, in order to avoid delays.

What if I change financial institutions?

Notify us in writing, or call our Customer Contact Center, and we will provide you with a new EFT Authorization Form to complete and sign. Return it to us, along with a voided check or withdrawal slip. Please allow at least 30 days for the change to become effective.

Can this transaction affect the guarantees on my policy?

Yes. To ensure guarantees occur as illustrated, it is imperative for draft dates to occur prior to the policy's monthly anniversary. If a specific draft date is requested for UL policies, we will honor your request; however, please be aware that the drafts will take place on the requested date **prior** to the monthly anniversary date for your policy. If no preferred draft date is requested, we will set the draft date for up to 3 days prior to the policy date. The draft date will be selected at placement based on the policy date.

How do I start the plan?

Complete the reverse side of this form and forward it to us immediately. We appreciate the opportunity to serve you and hope that you will be pleased with this convenient method of payment.

Concord Mailing Address:

PO Box 515
Concord, NH 03302-0515
Phone: 800-487-1485
Fax: 800-819-1987

Greensboro Mailing Address:

PO Box 21008
Greensboro, NC 27420-1008
Phone: 800-487-1485
Fax: 800-819-1987

Group Protection Mailing Address:

PO Box 2616
Omaha, NE 68103-2616
Phone: 800-423-2765
Fax: 877-573-6177