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Broker/Agent Electronic Payment Authorization Agreement

If you have any questions completing this form, please contact Sentara Health Plans Finance at EFT_ERA_INQUIRY@sentara.com

*An asterisk denotes required information

Broker Information	
* Broker Name	Zeta Financial Advisers
Broker Identifiers Information	
* Broker Federal Tax Identification Number (TIN) or Employer Identification Number (EIN)	
* National Producer Number (NPN) 567890123	
Broker Contact Information	
* Broker Contact Name Fiona Lee	
* Address	600 Birch Lane
* City Miam	i * State FL * Zip 33101