



Degree of Honor Protective Association

400 Robert St. N. Suite 1600, St. Paul, MN 55101-2029

800-947-5812 or 651-228-7600

Fax: (651)224-7446

degreeofhonor.org

ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION

PLEASE PRINT IN BLACK INK

Degree of Honor has Electronic Funds Transfer available! If you are interested in this payment option, please complete this form and return it with a voided check, deposit or withdrawal slip.

Policy Information

Application for: New EFT Change to existing EFT

List Insured Name and Policy Number for those policies to be paid under this agreement:

Name	Policy #	Name	Policy #
_____	_____	_____	_____
_____	_____	_____	_____

Banking Information

Name of Financial Institution: _____

Address: _____

Phone Number: _____

Account Type: Checking (attach a voided check)
 Savings (attach a voided withdrawal/deposit slip)

Available monthly draft dates: 1st 8th 16th 23rd

Frequency of draw: Monthly Quarterly Semi-annually Annually

Bank Routing number (nine digit): _____

Account Number: _____

Account holder Information

Note: This authority is to remain in full force and effect until the Financial Institution has received written notification from you of its termination in such time and in such manner as to afford Financial Institution a reasonable opportunity to act on it. The account holder has the right to stop payment of a premium by notification to the Financial Institution prior to charging the account. After the account has been charged, a customer has the right to have the amount of an erroneous payment immediately credited to his(her) account by the Financial Institution up to 15 days following notification.

I(we) hereby authorize the above named company to initiate automatic premium payments to be charged to my(our) account indicated above and the financial institution listed on this form to charge these premiums to such account.

Account holder Signature: _____ Date: _____

Account holder Signature: _____ Date: _____

Both signatures are required on joint accounts.

Account holder Phone Number(s): _____

This form and a voided check or savings slip must be returned at least two weeks prior to your selected draft date to allow adequate time to set up the initial draw from your bank.