

# Automatic Bank Check Plan Authorization Form Instructions

Be sure the following Steps have been completed before mailing or faxing:

## STEP 1

### Authorization to Debit

- **Recurring Automatic Bank Check (ABC)**  
Check this box if you authorize recurring monthly premium payments deducted from your account.
- **Initial Premium \$ \_\_\_\_\_**  
Check this box if you authorize a one-time debit for the Initial Premium Only for the amount stated on this form.
- **Recurring Automatic Bank Check (ABC)**  
Check this box if you authorize payment from an existing bank draft. Include one of the certificate numbers that is on the draft.

## STEP 2

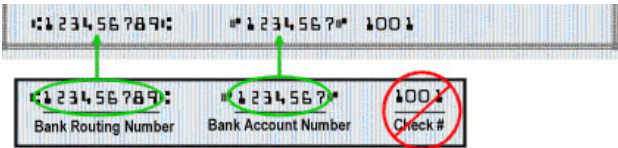
### Select a Debit Day

- **1st of the month**  
Example: January 1<sup>st</sup> pays the premium and/or loan for the month of January.
- **15th of the month**  
Example: January 15<sup>th</sup> pays the premium and/or loan for the month of February.

## STEP 3

### Bank Account Information

- Attach a Voided check OR fill out the following information:
  - **Select Type of Account**  
Check the applicable box of a Checking account or Savings account.
  - **9-Digit Bank ACH Routing #**
  - **Account#**



## STEP 4

- **Enter CERTIFICATES to be debited**
  - Provide ALL of the **Certificate Numbers** and **Insured's Names** to be drafted.
  - Provide the **Premium** payment amount if known.
  - Provide the **Loan** repayment amount if this is to be included.
- **Change of Address**  
Check the box **YES** if you would like us to use the address listed on the voided check.
- **Effective Date**  
Write the month and the year we should begin debiting your account.

## STEP 5

- **Authorized Signature/s**  
**Print your name, Sign and date** the authorization form if you are the authorized user(s) of the bank account.
  - Single Signature if one authorized user.
  - Joint Signatures if this is a joint account.

Mail or fax completed form to:

ABC  
Modern Woodmen of America  
PO Box 2005  
Rock Island, IL 61204-2005  
Fax Number: (309) 793-5640

# Debit Authorization

Modern Woodmen of America  
1701 1st Avenue, Rock Island, Illinois 61201  
Phone: 309-558-3077 or 1-800-447-9811  
www.modernwoodmen.org



TO AUTHORIZE **DEBITS DRAWN** BY MODERN WOODMEN OF AMERICA, ROCK ISLAND, IL 61201

**STEP 1 – SPECIFY** type of debit authorization: (Check all applicable boxes)

- Recurring Automatic Bank Check (ABC)     Initial Premium (EFT) \$ \_\_\_\_\_
- Debit **EXISTING BANK DRAFT** with certificate # \_\_\_\_\_ (Provide # then skip to Step 4 to add)

**STEP 2 –** Select **DAY TO DEBIT**:  1<sup>st</sup> of the month     15<sup>th</sup> of the month (covers premium due the following month)

**STEP 3 –** Complete **BANK ACCOUNT INFORMATION**: **COMPLETE** the following step entirely or attach voided check

Select Type of Account:  Checking     Savings

Bank Name: \_\_\_\_\_

9-Digit Bank ACH Routing #: \_\_\_\_\_

Bank Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Account#: \_\_\_\_\_

**STEP 4 –** Enter **CERTIFICATES** to be debited:

Certificate Number	Member's Name	Premium Amount	Loan Repayment Amount
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$

Change my address to that shown on attached voided check (Check box)    Yes     No

Begin drafting this bank information effective \_\_\_\_\_, \_\_\_\_\_.

MONTH                      YEAR

**STEP 5 – Authorized SIGNATURE:**

I hereby request and authorize you to pay and charge to my account, checks or electronic debits drawn on my account by and payable to the order of Modern Woodmen of America of Rock Island, Illinois. I agree that your rights in respect to each such debit shall be the same as if it were a check or electronic debit drawn on you and signed personally by me. I further agree to allow refunds to be electronically credited to my account. This authorization shall remain in effect until you receive revocation in writing from me.

Date \_\_\_\_\_

\_\_\_\_\_  
Printed Name of Authorized User(s) as shown on Bank Records

\_\_\_\_\_  
Printed Name of **Joint** Authorized User(s) as shown on Bank Records

X \_\_\_\_\_  
Signature of Authorized User as shown on Bank Record

X \_\_\_\_\_  
Signature of **Joint** Authorized User as shown on Bank Records

