

## BANK DRAFT AUTHORIZATION FORM

This form cancels and supercedes any previous bank draft authorization requests on file. This form must be filled out completely and accurately. In the event that all information is not completed correctly, this form will be returned.

Group Name: _____		Group Contact Name (Printed): _____	
<p style="text-align: center;"><b>I AM (Check One)</b></p> <p><input type="checkbox"/> Adding New Banking Information</p> <p><input type="checkbox"/> Changing Existing Banking Information</p>	<p style="text-align: center;"><b>ACCOUNT TYPE</b></p> <p><input type="checkbox"/> Checking</p> <p><input type="checkbox"/> Savings</p>	<p>Bank Name: _____</p> <p>Routing Number (9 Digits): _____</p> <p>Account Number: _____</p>	
<p>Note: For accuracy, call your financial institution to verify your account and transit routing number(s).</p>			
<p>Accounts will be debited on or after the 20th of each month.</p>			
<p><b>BANK DRAFT AUTHORIZATION</b></p> <p>I (we) hereby authorize Vault Admin Services, LLC (VAS) to initiate debit (withdrawal) entries and adjustments for any debit (withdrawal) entries in error to my account at the financial institution indicated above:</p> <p>This authorization is to remain in full force and effect until Vault Admin Services, LLC (VAS) has received written notification to terminate group or individual coverage. It is understood that notification of any changes or terminations is required by the 15th of the month. Payments not honored by the financial institution may incur a \$50.00 NSF Fee which will be electronically debited from the account at the time VAS attempts to reprocess the draft. If subsequent electronic funds transfer is not honored by said financial institution, it is understood that the plan administered by VAS and all benefits shall be cancelled immediately.</p>			
<p>_____ <b>SIGNATURE OF ACCOUNT HOLDER</b></p>		<p>_____ <b>PRINTED NAME OF ACCOUNT HOLDER</b></p>	
<p>_____ <b>Date</b></p>			

Name of Policy \_\_\_\_\_

Montly Deduction \$ \_\_\_\_\_

Name of Policy \_\_\_\_\_

Monthly Deduction \$ \_\_\_\_\_

Total Monthly Deduction \$ \_\_\_\_\_