## **Direct Deposit Authorization**





· · · · · · · · · · · · · · · · · · ·		commission payments?  Choice Builder®	☐ Both
Carrier / Agency / Broker Information			
Name  Phone # (XXX) XXX-XXXX  E-mail Address  Bank Information	Bank Account Type:	Fed	A separate form is required for each bank account
Your Account #  Branch Address  City			
I hereby authorize CHOICE Administrators <sup>®</sup> to initiate credirentries for deposit of net commission payments and if necessary, to initiate debit entries/adjustments for any credimade in error to my account at the above named Depositor Institution.  This authorization will remain in effect until CHOICE Administrators has received written notification to terminate new account/financial institution has been designated.	Better He 1234 Proc Anywhere  Or a  PAY TO TH ORDER OF  ANYTOWN Anytown, M For  I: 1 2 3	nere to locate your alth Brokers tucer Way , MD 20000 Dat E BANK D 20000 D4567891:0000 D16	\$ DOLLARS
Signature  When completed, please return to:	Print Name		Date (MM/DD/YYYY)
Finance Customer Service CHOICE Administrators 721 South Parker, Suite 200 Orange, CA 92868 Phone: (714) 567-4390 E-mail: commissions@calchoice.com Fax: (714) 908-3519 www.choiceadmin.com			CHOICE Administrators Staff Use Broker #  Date (MM/DD/YYYY)

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