

# Electronic Fund Transfer

SecureHorizons will deposit your check directly to your bank account. We make the deposit according to the current Commission Deposit Schedule. Below is an authorization form so that you may sign up for this service. Just complete the form and mail it back with your appointment paperwork.

## Fund Transfer Authorization

I (We) do hereby authorize the deposit of all commission payments due me (us) to my (our) checking account indicated below and the Depository Financial Institution named below to credit the payment(s) to such account by SecureHorizons.

Account Number

Financial Institution Name

City

State

I (We) reserve the right to revoke and cancel this authorization. Such revocation and cancellation to take effect upon written notice received at the office of SecureHorizons with reasonable time to act on such notice.

Agent Signature

Agent Number (if known)

Date



John Doe  
123 w. Main St.  
Anytown, USA 12345

DATE \_\_\_\_\_

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**ATTACH A BLANK VOIDED CHECK HERE**  
**(Deposit slips are NOT acceptable)**

PAY TO THE ORDER OF \_\_\_\_\_ \$ \_\_\_\_\_  
DOLLARS

YOUR BANK  
ANYTOWN, USA

FOR \_\_\_\_\_

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