

First **Catholic** Slovak Ladies **Association**

24950 Chagrin Blvd., Beachwood, OH 44122 1-800-464-4642 www.fosla.org

ELECTRONIC FUNDS TRANSFER (EFT) CREDIT AUTHORIZATION

For Annuity Distribution

FCSLA is pleased to announce that that scheduled distributions from your Flexible Premium Deferred Annuity may now be made electronically if your financial institution is a member of the National Clearing House Association (NACHA). Direct deposit is the fast, easy way to receive you scheduled payments. If you would like to sign up for this service, complete the enrollment information below, attach a voided check, and return in the enclosed envelope.

Your Information :

Name (print): _____

Address: _____

Your FCSLA Certificate Information :

Certificate Number: *(leave blank if new application)*

_____/_____

Effective Month / Year
(allow one month to process request)

Effective Day will be the last day of each
payment's scheduled month.

Your Bank Information :

Bank Name (print) _____

Bank Routing Number

Bank Account Number

Checking
(Att. voided check)

Savings
(Att. deposit slip)

Yes, enroll me in FCSLA's EFT to pay my premiums!

Authorized signature(s)

() _____
Phone Number

Date

I authorize FCSLA to electronically transfer funds into my account identified above, for purposes of depositing distribution from my annuity. If the effective date is not a business day, I understand that the funds will post on the following business day. I understand that I may cancel or change this authorization by mailing written notice to FCSLA. FCSLA reserves the right to refuse or terminate automated payment services.

Attach a VOIDED blank check and return this form to the Home Office.