



7510 Shoreline Drive
Stockton, CA 95219
(800) 350-3989
billing@cypressadmin.com

AUTHORIZATION FOR DIRECT DEPOSIT OF COMMISSIONS

I hereby authorize Cypress Ancillary Benefits to electronically credit my account (and if necessary, to electronically debit my account to correct erroneous credits) at the financial institution named below. I agree that the ACH transactions I authorize comply with all applicable laws.

Agency/Broker Name: _____

Bank Name: _____

Routing Number: _____

Account Number: _____

Checking Account Savings Account

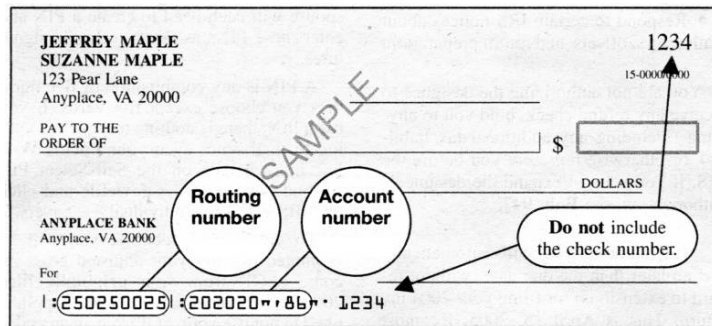
I understand that this authorization will remain in full force and effect until I notify Cypress Ancillary Benefits in writing at 7510 Shoreline Drive, Stockton CA 95219, Attn: Billing Administration, or by calling 800-350-3989 at least 30 days prior to the proposed effective date of the termination of authorization.

PLEASE NOTE: You may access your commission statements on our portal at www.cypressadmin.com. Your monthly commissions will be automatically deposited into the account the following month. The credit will occur between the 1st and 5th of every month for the prior month's commissions earned. A return fee of \$15 will be applied to any returned items.

Authorized Signature(s): _____ Date: _____, 2017

Print Name and Title: _____

Please attached a VOIDED CHECK to this authorization if a checking account will be credited.



Note. The routing and account numbers may be in different places on your check.