

Automatic Bank Check Plan Authorization Form Instructions

Be sure the following areas have been completed before mailing:

- Type of Account
- Debit Day
- Bank Routing Number, Account Number, Bank Name and Address or attach a voided check.
- Loan repayments to be included on the Automatic Bank Check plan in the column 'Certificate Loans to be repaid by ABC.' Include the certificate number and monthly repayment amount desired.
- List premium payments to be included on the Automatic Bank Check plan in the column 'Existing Certificate Premiums to be paid by ABC'. Include the Insured's name and certificate number.
- Indicate the first month and date the deduction from the account is to be made.
- The authorization form must be signed and dated by the payor of the bank account.
- If needed, complete the change of address notification.

Mail or fax completed form to:

Non-Variable Products:

ABC

Modern Woodmen of America

PO Box 2005

Rock Island, IL 61204-2005

Fax number: (309) 793-5640

Variable Products:

Modern Woodmen of America

Variable Product Administrative Center

PO Box 9284

Des Moines, IA 50306-9284

Fax number: (515) 226-6870