

Why Should You Sign Up for Direct Deposit Commissions?

Electronic Funds Transfer (EFT) deposits your advance and commissions checks directly and automatically to your bank account.

Spend more time selling, not banking! The direct deposit system will save you both time and money. No longer will you need to wait for the mail person to deliver your check and then rush to deposit it before the bank closes. Even if you are out of town or on vacation, you can count on your funds being available in your bank account rather than sitting in your mailbox! No more express charges, no lost or stolen checks. Floods and blizzards will not delay the deposit of your funds. Not only are your funds deposited directly to your account, but you receive e-mail notification of the deposit.

To get started just fill out the Agent Authorization Agreement, form #EFT-GAC-06. If the deposits are going to a checking account, a voided check must be attached to the form. Attach a deposit slip if you prefer to use a savings account for the deposit of your funds. Please make sure that all information is complete and the form is signed at the bottom with an authorized account signature. Return the completed form and voided check / deposit slip to:

General Agent Center
15575 N. 79th Pl. #100
Scottsdale, AZ 85260
Or fax to (480) 596-6518

That's all there is to it! After receiving your form, EFT will be ready in 5-10 days and you will be notified by e-mail as each deposit is made. If you have any questions, please contact the marketing department.



Agent Authorization Agreement for Automatic Deposits – EFT Credits

Producer Name: _____

**Producer FEIN/SSN: _____

*Producer E-mail Address: _____

*(For notification of funds availability)

** Commission earnings will be reported to the IRS under the FEIN (or SSN) of the license holder (as allowed under State licensing regulations).

Producer Signature: _____ Date: _____

I (we) hereby authorize **General Agent Center**, through **Home National Bank, Scottsdale**, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries made in error to my (our) _____ Checking or _____ Savings (check one) account indicated below. I (we) also authorize my (our) depository named below, to debit and/or credit the same to such account.

Name(s) on Account: _____
(Please print)

Signing Authority: _____
(Please Print)

Bank/Credit Union Information: **(Please attach a voided check or savings account slip)**

Bank Name: _____

Transit/ABA Number: _____

Account Number: _____

Authorized Account Signature: _____