



Mail signed and completed form to:

Gerber Life Insurance Company, 445 State Street, Fremont, MI 49412 or in Canada, 2233 Argentia Road, Suite 200, Mississauga, ON L5N 9Z9.

With the Automatic Payment Plan, there's no need to write monthly checks or remember due dates. We'll automatically send a transaction to your financial institution on or near the due date. The money is deducted from your account, with your bank statement serving as a record of premiums paid. Enrollment is easy! Just follow these steps:

- 1. Complete, print and sign this authorization form.
2. For bank approval, write "VOID" across a blank, unsigned check.
3. Attach the voided check to your form, and mail it to the address listed above.

Cancel this privilege at any time by notifying Gerber Life. Please allow 7 days for processing.

AUTOMATIC PAYMENT PLAN AUTHORIZATION FORM

I hereby authorize the bank or financial institution named on the attached sample below to pay my insurance premium every month (or at the time period checked below) by check or electronic account debits drawn by and payable to Gerber Life Insurance Company.

The bank or financial institution will be fully protected in honoring these payments until written notice cancelling this request is received.

Policyowner Name First Name Middle Initial Last Name

Address Phone ()

City State/Province Zip Code/Postal Code

Gerber Life Policy Number(s)

Name of person(s) insured under this policy

Accountholder's name (please print)

X (Accountholder's Signature) Date / /

Preferred billing method (check one): Monthly Bi-monthly Quarterly Semi-Annually Annually

Attach Check Here

Write "VOID" across the face of your blank check as shown. Be sure it is not signed. Your Automatic Payment Plan will be processed as soon as possible. Please be sure your checking account is adequately funded.

