## NATIONAL INCOME LIFE INSURANCE COMPANY % National Income Life Service Center P.O. Box 2608 • Waco, TX 76797

## **Bank Draft Authorization**

• This authorization **MUST** be printed and filled out rather than submitted over the internet. National Income requires an original signature on a bank draft authorization and a void check from the account to be drafted. Other types of requests (such as name and address change) do not require signatures allowing you to request these services via the internet.

## Send authorization with the original signature and a void check to:

National Income Life Service Center P.O. Box 2608 Waco, TX 76797

## **BANK DRAFT AUTHORIZATION**

National Income Life Insurance Company is authorized to initiate debit entries to the account indicated below, and the bank named below is authorized to debit the same to such account. This authority can be terminated by the undersigned at any time by written notification to the Company, provided only that the Company and the bank will have a reasonable opportunity to act on such notification.

Bank Name Address			
Transit/ABA No	Account No	)	
Type of Account:   Checking	Savings		
PLEASE	ATTACH A VOIDED PE	RSONAL CHECK	
X			
Signature of Payor		Date	Year
Name of Insured			
Policy Number(s) of Existing Policie			,
Requested Draw Date, If Any			-