

We are very pleased to announce the MOA Service Corporation is now offering a new Direct Debit for payment of your premiums. The advantages of direct debit are:

1. **Saves you time** – no more checks to write and mail:
2. **Ensures uninterrupted insurance coverage** as long as adequate funds are in your account.

If you are interested, please fill out and mail the Authorization agreement below. Please note:

- The form must be signed by the **authorized account holder**;
- You will continue to receive your monthly statement;
- Your account will be debited for the **“Amount Due”** shown on your statement.

SECTION II

I (we) hereby authorize Irwin Union Bank, 500 Washington Street, Columbus, Indiana, 47201 to charge my/our checking account at the depository bank or financial institution named below for my/our monthly insurance payment.

Bank/Financial Institution _____ Routing # _____

Address _____ Account # _____

City _____ State _____ Zip _____

Irwin Union Account Number 39911912 Day of Month for Payment 25th Amount _____

Start Date _____ For Benefit of MI Osteopathic Association-Insurance fund. Branch 21

Please include a deposit slip or voided check to verify your checking account number and bank transit number with your bank or financial institution.

This agreement authorizes Irwin Union Bank to transfer funds from my/our bank account to pay the insurance payment. This payment may fluctuate from time to time as premiums change. This authorization will remain in full force until Irwin Union Bank and the “Depository” have received written notice from me/us to terminate the agreement in such time and in such a manner as to afford Irwin Union Bank and “Depository” reasonable opportunity to act on it prior to charging the account.

SECTION III

Print Your Name(s) _____ Date _____

Group/Subscriber Name _____

Your Signature(s) _____ Date _____

Your signature is acknowledgement that you’ve received a copy of this authorization agreement.