



DEBIT/CREDIT COMMISSION AND STATE LICENSING FEES

I (we) hereby authorize United Automobile Ins. Co / United Group Underwriters LLC, hereinafter called COMPANY, to initiate credit/debit entries to my (our) account indicated below and the financial institution named below, hereafter called DEPOSITORY, to credit the same to such account.

This authorization is for the purpose of state licensing fees and/or commission activity and I (we) understand that amounts may vary.

Company Name (Print)	Financial Institution ABA Number
	Account Number at Financial Institution
Financial Institution Name (Print)	
Financial Institution Address (Print)	

This authority is to remain in full force and effect until COMPANY, has accepted written notification from me (us) of its termination in such time and manner as to afford COMPANY, and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

Print Name

Date

Signature

IMPORTANT: CHECK TYPE OF ACCOUNT: CHECKING SAVINGS

TAPE YOUR VOIDED CHECK HERE