

ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION AGREEMENT

Insurance Premiums

I hereby authorize Alfa Insurance and the financial institution designated below to deduct recurring insurance premium payments from my bank account. Payment will be applied to the Billing Reference Number indicated below and will continue to be deducted on approximately the same date and frequency.

Billing Reference Number:	Requested Draft Date:	Draft payment from:		
Routing Number:	Account Number:	<input type="checkbox"/> Checking		
Financial Institution:		<input type="checkbox"/> Savings		
Term of Payment:	Monthly	Quarterly	Paid in Full	Semi-Annual
Auto	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Property or Watercraft	<input type="checkbox"/>	N/A	<input type="checkbox"/>	<input type="checkbox"/>
Businessowners or Church	<input type="checkbox"/>	N/A	<input type="checkbox"/>	<input type="checkbox"/>

Alabama Farmers Federation (AFF) Membership Dues

I authorize Alfa Insurance on behalf of AFF to annually deduct from the bank account above my AFF Membership Dues in the amount of \$33. This payment is in addition to my deduction for insurance premiums.

Alfa Insurance was founded by AFF to provide coverage for members. AFF Membership is required for Alfa's property and casualty insurance products in Alabama. Membership includes a variety of valuable benefits; learn more at AlfaFarmers.org/perks.

FarmPAC Contribution

I authorize Alfa Insurance on behalf of AFF to annually deduct from the bank account above an additional \$3 contribution for FarmPAC.

FarmPAC is the state political action committee of the AFF. The purpose of FarmPAC is to achieve good government and economic improvement for all people in the state of Alabama, and to that end, raise funds in order to make contributions to support issues and political candidates at the state and local level with an interest in promoting the welfare of the taxpayers, farmers, rural, and agricultural interests in Alabama. Your contribution to FarmPAC is voluntary, and the amount listed on this invoice is merely a suggested sum. A contribution to FarmPAC is not a condition of Membership in the AFF and you have the right to contribute without reprisal. The AFF will not favor or disadvantage any member by reason of the amount of his or her contribution or his or her decision not to contribute. Contributions made to FarmPAC are not deductible as charitable contributions for income tax purposes.

Other Terms

If I elect to stop making payment by EFT, I agree to notify Alfa at least 7 days prior to the current EFT payment due date by contacting my local Alfa office or contacting the Customer Resource Center at 1-800-964-2532. If my routing or account number changes, I will provide Alfa with the new information at least 20 days prior to the next scheduled draft date. In the absence of required notification, I agree to honor any payment deducted or fees incurred. I agree that if any dishonored payment results in the termination of my insurance, Alfa shall be under no liability. I agree to pay Alfa a dishonored item fee of \$30 for each item returned as unpayable by my financial institution. I understand that I will receive advance notice of a change in the EFT amount only if the current amount differs by \$1 or more from the prior amount deducted. I understand my annual deduction for AFF Membership Dues and FarmPAC contribution begins when combined insurance policy and membership billing is available, and I will also receive advance notice of the annual deduction.

Print Name (Payer)

Signature of Payer as it appears on Account

Payer's Contact Telephone Number

Date

Named Insured:

Service Center:

Please retain a copy for your records.