Federal Life Insurance Company
P.O. Box 147, Lincolnshire, IL 60069
800-233-3750
www.federallife.com

Annuity EFT Direct Deposit Form

Use this form to add or change direct deposit instructions for recurring annuity payments. Direct deposit is not available for one-time disbursements or other transaction types. Completed forms may be submitted by mail, email (service@federallife.com), or fax (847-850-3304).

Section A: Contract Information

Contract Number(s)	**Full Name of Annuitant**
Contract Owner's Full Name *(if different than annuitant)*	**Contract Owner's Phone Number**
Contract Owner's Email Address	**Contract Owner's Mailing Address**

Section B: EFT Change Request

1. I would like to make the following direct deposit changes to the contracts listed above.
   - ☐ **Start/Add** direct deposit to recurring annuity payments —***please attach a voided check or deposit slip***
   - ☐ **Change** my **banking information** on existing annuity payments—***please attach a voided check or deposit slip***
   - ☐ **Stop** direct deposit on annuity payments

2. If **adding** or **changing** your bank account information for direct deposit, fill out the **Banking Information** section below.

Banking Information	Depository Name *(bank account holder)*	
	Financial Institution Name	
	Routing Number	
	Account Number	
	Account Type	☐ Checking ☐ Savings

Section C: Signature(s)

I am the payee for the contract(s) listed above and I request that all the payments made to me from the contract(s) listed above from Federal Life Insurance Company be directly deposited into my bank account at the financial institution listed above. In the event of an overpayment to me, I authorize the financial institution listed below to refund any overpayments to Federal Life Insurance Company. Thirty (30) days written notice to Federal Life Insurance Company is required to change or cancel this authorization.

▶ _____ _____ _____

Contract Owner's Signature *(electronic signatures not accepted)* | **Printed Name** | **Date**

▶ _____ _____ _____

Bank Account Holder's Signature *(if different than Contract Owner)* | **Printed Name** | **Date**

Submit this form along with a copy of **Voided Check** or **Deposit Slip** (if applicable)