

## NAHU's Autocheck Authorization Form

Below is NAHU's Autocheck, a pre-authorized checking account automatic draft system for paying your membership dues on a monthly basis. Using the Autocheck will eliminate the danger of lapsing your membership privileges and minimizes the impact upon your cash flow. The monthly cost is \$30.42 which is one-twelfth of your national, state, and local dues. This amount will be withdrawn in 12 equal payments.

### AUTHORIZATION AGREEMENT FOR PRE-ARRANGED PAYMENTS (DEBITS) OF MEMBERSHIP DUES

I (we) hereby authorize the National Association of Health Underwriters to initiate debit entries to my (our) account named at the bank named below, hereinafter called BANK.

This authority is to remain in full force and effect until BANK has received written notification from me (or either of us) of its termination in such time and in such manner as to afford BANK a reasonable opportunity to act on it. A customer has the right to stop payment on a debit entry by notification to BANK at least 3 days prior to the date scheduled for charging the account. A customer also has the right to question BANK about any debit entry by notifying BANK not less than 60 days after BANK sends a statement to customer containing the entry. BANK will handle all such questions in accordance with its procedures and requirements for resolving errors found in Regulation E issued by the Federal Reserve Board.

Please complete this section

_____	Customer Bank Name
Name	_____
_____	_____
SS # or #'s	Customer Account #
_____	_____
Date	Customer Account Name:
_____	_____
Signed	Starting Date:
_____	_____
Signed	Dues Amount \$
_____	_____

Please send this form, with a voided check from your account, to:

NORTH COAST ASSOCIATION OF HEALTH UNDERWRITERS  
50 Old Courthouse Square, #610, Santa Rosa, CA 95404

For additional information call Deborah Bezona at 707-576-1920 -or- PESC at 800-910-6622