

**Please Check One**



☐ Liberty Bankers Life Insurance Company

☐ The Capitol Life Insurance Company

**Direct Deposit via ACH**

PO Box 224, Brownwood, Texas 76804-0224 • 5750 County Road 225, Brownwood, Texas 76801 (Overnight) • 800-745-4927 • 866-505-9377 (Fax)

**Authorization Agreement for Direct Deposit  
of Annuity Distribution(s) via ACH  
(Not Available for Distributions in Excess of \$50,000)**

I/we authorize the Company to initiate credit and/or debit entries as adjustments for any credit entries made in error to the account number shown below. The Depository named below is authorized to credit and/or debit the same to such account as indicated. This agreement will remain in effect until the Company terminates it or until written notice is received from me/us of its termination and the Company has sufficient time to act upon it. If at any time my/our Depository changes, I/we will provide a new notarized Authorization for Direct Deposit.

Depository Name and Branch: \_\_\_\_\_

Account Number: \_\_\_\_\_ Type: ☐ Checking ☐ Savings

Transit / ABA Number: \_\_\_\_\_

Address: \_\_\_\_\_  
City State Zip

Policy Number: \_\_\_\_\_

Policy Owner Name (Print) \_\_\_\_\_

Joint Owner Name (Print) \_\_\_\_\_

Policy Owner Signature and Date \_\_\_\_\_

Joint Policy Owner Signature and Date \_\_\_\_\_

**A copy of a voided check from this account MUST be attached  
in order for us to process this request.**

**Notarization**

**(Notarization not necessary when form submitted with an application for a new policy.)**

State of \_\_\_\_\_

County of \_\_\_\_\_

Signed and sworn to (or affirmed) before me on \_\_\_\_\_  
Date

by \_\_\_\_\_  
Printed name(s) of individual(s) making statement

who proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

☐ personally known to me **OR** ☐ produced Identification

Type of ID \_\_\_\_\_

Signature of notary public \_\_\_\_\_

Stamp/Seal

\_\_\_\_\_  
(Name of notary, typed, stamped or printed)

My commissions expires: \_\_\_\_\_  
Date