



INVESTORS HERITAGE *Life Insurance Company*

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 Fax: 502.875.7084 | E-mail: ihlic@ihlic.com | www.investorsheritage.com

REQUEST FOR PREAUTHORIZED TRANSFER PLAN (PAT)

AUTHORIZATION AND SIGNATURE

I hereby request and authorize Investors Heritage Life Insurance Company, Frankfort, Kentucky ("Investors Heritage") to make preauthorized transfers from my bank account by way of draft, check, or electronic transfer for the payment of premiums for any policy/certificate(s) listed. This authorization shall be subject to the following conditions:

- (1) The preauthorized transfer shall occur on or after the premium due dates unless otherwise specified;
- (2) Investors Heritage shall not incur any liability on any transfer returned by the bank;
- (3) Amounts not honored by the bank after initial deposit shall constitute non-payment of premium and coverage shall lapse subject to all provisions of each policy;
- (4) This authorization may be revoked by either party upon 30 days advance written notice, and Investors Heritage may immediately revoke this request if any preauthorized transfer is dishonored by the bank when presented.

_____ **Date:**

_____ **Depositor's name typed or printed**
 EXACTLY as it appears on bank records

_____ **Depositor's signature EXACTLY as it**
 appears on bank records

PREAUTHORIZED TRANSFER PLAN DATA

- Apply to attached application** **Apply to existing policies listed below**

Insured's Name (First, Last) _____

Existing Policy Numbers _____

PREMIUM PAYMENT INFORMATION

Payments to be made: Monthly Quarterly Semiannually Annually

Enter date of month if specific charge day is requested (1st – 28th only): _____

Are premiums being paid with Social Security benefit deposits? Yes No

If "Yes" choose from following payment dates: 1st of month 3rd of month
 2nd Wednesday 3rd Wednesday 4th Wednesday

BANK INFORMATION

Name of Bank: _____
Bank or branch address: _____

COMPLETE THE FOLLOWING OR SUBMIT A VOIDED CHECK

Account Type: **Checking** **Savings**

Depositor's Bank Account Number:

Bank Routing Number: