YOU HAVE EARNED A BONUS PRIVILEGE

Are you always in a hurry when you pay bills? Do you hate having to write checks, find stamps and go to the mailbox? *Do you worry about identity theft*?

Imagine being free of these hassles!

You've earned access to a secure convenience paying service. It's yours to use at NO COST¹.

What it does is pay your premium notices securely, directly from checking account.

Your payment is **never missed** and is **always paid on time**. Plus, there's no chance of envelopes getting lost in the mail, leaving you unprotected.

Claim your convenience payment privileges by returning the authorization below.



2) Detach and return the Form.

MAIL TO:

Insurance Plans P.O. Box 14464 Des Moines, IA 50306-9468

¹ Financial institution fees may apply.

	DETACH AND MAIL FORM	
067755030202	SAFEguardPAY [®] Authorization Form	
Name:	Insurance Certificate #:	
1 Please Complete:	I would like my premium payments withdrawn monthly.	
Checking Account		
Routing #:	Account #:	
2 Please Sign & Date:		
	inistration LLC to establish an automatic bill payment to pay my insurance premiums when they come due. I also authorize my f gly. I understand if my premium changes I will be notified and my SAFEguardPAY® deduction will be adjusted accordingly.	inancial
Sign Here Signature: X	Date: X	
Continue to pay the premium notices you your account the month it is due. You can	I receive in the mail until your SAFEguardPAY [®] convenience payment has been established. Your premium payment will be do n cancel or change this arrangement at any time by contacting the plan administrator. PLEASE RETURN to Insurance Plans, f	
4404, Des Moines, IA 50306-9468. You	'Il receive a notice when your payment service begins.	