Gerber Life will not charge your account any money until 3 days after your application is approved.

1\$

THE BIG BANK ANYPLACE, USA

How to pay your premiums automatically through your CHECKING ACCOUNT:

- **1.** Complete and sign the Authorization Form below.
- 2. Please provide the required financial information. Contact your financial institution for the correct account and routing numbers.
- **3.** Your first premium will be withdrawn 3 days after your application is approved by Underwriting unless a Preferred Payment Date has been requested.
- **4.** Premiums will continue to be automatically withdrawn each month unless you indicate a different time period by selecting 3 months, 6 months or 12 months in the space provided on this Form.

How to pay your premiums automatically through MASTERCARD or VISA:

MasterCard

- **1.** Complete and sign the Credit Card Authorization Form below.
- 2. Your first premium will be charged 3 days after your application is approved by Underwriting unless a Preferred Payment Date has been requested.
- 3. Premiums will continue to be charged monthly to the credit card you select, unless you indicate a different time period by selecting 3 months, 6 months or 12 months in the space provided on the Form.

Questions? Call our toll-free number: 1-800-428-4947 Monday-Friday, 8:30am to 6pm (EST)

Use this Authorization Form for payment by automatic withdrawal from CHECKING ACCOUNT

□ Yes, I hereby authorize the bank or financial institution named below to pay my insurance premiums as indicated below, by automatic withdrawal from my checking account. I understand that my 1st premium will not be withdrawn until 3 days after my application is approved by Underwriting unless a Preferred Payment Date has been requested. I also understand that I may cancel this authorization at any time by notifying Gerber Life Insurance Company.

Name						
NameLast Name			First Name		Middle Initial	
Address			Phone			
					Zip	
Insured's name: _			Date of Birth:			
	\Box Checking \Box Sa				int #	
Χ				Date	Date	
	(Accountholder's Signa	ature) l	If application not approved by date selected, premium will be withdrawn on the			
Preferred Payment Date			date selected the following month. If the insured's age changes prior to selected date, the premium will be based on the new age.			
Please automatica	ally withdraw my pro	emiums eve	ry (check 🗹 one): 🗌 🗆	month 🗆 3 months 🗆	6 months 🗌 12 months	

Use this Credit Card Authorization Form for payment by MASTERCARD or VISA

□ Yes, please charge my premiums to my credit card account. I understand that my 1st premium will not be withdrawn until 3 days after my application is approved by Underwriting unless a Preferred Payment Date has been requested. I also understand that I may cancel this authorization at any time by notifying Gerber Life Insurance Company.

Please check

✓one:

Mastercard – Must contain 16 numbers
VISA – Must contain 13 or 16 numbers

Card Number:		Exp. Date		
NameLast Name	First Name		Middle Initial	
Address	Phone			
City		State	Zip Code	
Insured's Name:				
X(Conditional Construct)	Date			
(Cardholder's Signature)	If application not approved by date selected, premium will be withdrawn on the			
Preferred Payment Date	date selected the following month. If the ins date, the premium will be based on the new		ges prior to selected	
Please charge my premiums every (check 🕢	rone): 🗆 month 🗆 3 months 🗆 6 n	nonths 🛛 🗆 12	2 months	