



SOUTHEAST SURPLUS

UNDERWRITERS GENERAL AGENCY, INC.

P. O. Box 3730 • Beaumont, TX 77704

409-924-8200 • 800-554-3301

*It's the risks we take.*SM **409-924-8282 FAX • 800-222-2329 FAX**

COMMISSION DIRECT DEPOSIT FORM

AGENCY NAME: _____

AGENT CODE: RFM-_____

Bank Sweep Form

I hereby authorize **Southeast Surplus Underwriters** to make deposits into my account at the financial institution named below for monthly commission payments.

Further, I agree not to hold **Southeast Surplus Underwriters** responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution.

This agreement will remain in effect until **Southeast Surplus Underwriters** receives a written notice of cancellation from me or my financial institution.

Account Information for Commission Deposits

Name of Financial Institution: _____

Routing Number: _____

Account Number: _____

Business
Checking

Personal
Checking

Commission statements will be posted online. You can limit who on your staff has access to these statements by adding an additional password. Do you want an additional password to be required to view your agency's commission statements? (Circle one)

Yes – please use _____ as the additional password.
No

Signature

Authorized Signature : _____ **Date:** _____

Please fax a voided check or deposit slip along with this completed form to (409) 924-8282 or (800) 222-2329. Or, you can email a scan of a voided check or deposit slip along with this completed form to ncain@ssuga.com. We cannot process this form without a voided check or deposit slip.