



MASSACHUSETTS PROPERTY INSURANCE UNDERWRITING ASSOCIATION

FINANCIAL DIVISION

TWO CENTER PLAZA
BOSTON, MASSACHUSETTS 02108-1904
(617) 723-3800 · (800) 851-8978 · FAX (617) 557-5686

TO: All Producers/Agents who receive
Monthly Agency Commission

FROM: Frances A. DiRusso

RE: ACH Electronic Funds Transfer Payments

How would you like to have your monthly commission credited to your bank up to ten days earlier than normal? Instead of waiting until the 20th of each month for your check to arrive by way of the postal system and then bringing it to your bank of choice you will soon be able to have funds transferred directly to your bank.

Attached you will find a form which should be filled out completely with your banking information. We will need this form filled out each time you make a change in any of your banking information (new bank, new account number). Also please include a blank check, which has been voided. The voided check will enable us to successfully pre-note your account as preparation and set up for future commission payments, which will be directly deposited to your account.

If you need any further information or have any questions, please do not hesitate to contact Angela Shen at (617) 557-5565 or email ashen@mpiua.com.

We hope that this service will be an enhancement that you will see as beneficial to your agency.

Thank you,

Frances A. DiRusso
Assistant Controller



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FINANCIAL DEPARTMENT

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ACH DEPOSIT AUTHORIZATION

PRODUCER NUMBER: _____

NAME _____ SOCIAL SECURITY/TIN NUMBER _____

ADDRESS _____ CITY, ST _____ ZIP CODE _____

NEW ENROLLMENT CHANGE IN ACCT CANCEL

I HEREBY AUTHORIZE MPIUA TO DEPOSIT PAYMENTS INTO THE ACCOUNT
MAINTAINED WITH THE FOLLOWING FINANCIAL INSTITUTION:

NAME OF FINANCIAL INSTITUTION: _____

ADDRESS OF FINANCIAL INSTITUTION (STREET, CITY, STATE, ZIP): _____

FINANCIAL INSTITUTION ABA ROUTING NUMBER: _____ BANK ACCOUNT NUMBER: _____

CHECKING ACCOUNT SAVINGS ACCOUNT

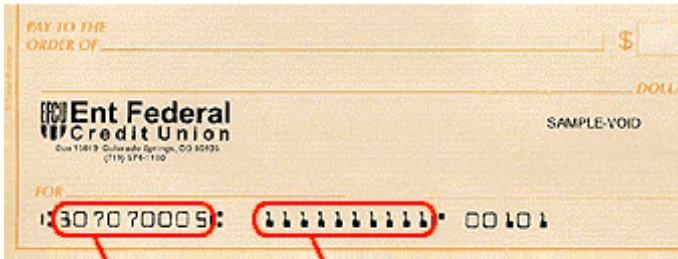
ATTACH VOIDED CHECK:

SIGNATURE

DATE

APPLICATION MUST BE TYPED OR PRINTED.

- CHANGES IN BANK OR ACCOUNT NUMBER ARE TO BE REPORTED **IMMEDIATELY** ON THIS FORM.
- WHENEVER A CHANGE IN ACCOUNT INFORMATION IS SUBMITTED, A DELAY OF THE NEXT ACH MAY OCCUR.



**Routing
number**

**Account
number**