

□New Request □Change in Depository

To be completed by producer. Fax completed form and a ph	otocopy of a voided	check to 816.88	1.8558.
COMMISSION RECIPIENT	SOCIAL SECURITY NO. / TAX ID NO.		PAYEE NO.
I authorize Union Security Insurance Company to direct my t as designated below. I understand this agreement will take e	otal Group Commiss ffect 30 days of rece	sion to my bank f ipt by Union Sec	or crediting to my account curity Insurance Company.
My account no	Type of account: Please include a	0	□Savings voided check.
Full name and address of bank to which payment is to be m	ade		

Deposits made under this agreement will be in full satisfaction of net pay due me. When the direct deposit is activated, your commission statements will only be available online at www.assurantemployeebenefits.com. I hereby authorize Union Security Insurance Company to initiate adjustments to my account for deposits made in error. I hereby release said bank from any liability, direct or indirect, which may occur as a result of making such refunds or adjustments initiated by Union Security Insurance Company. I also understand that Union Security Insurance Company reserves the right to pay me by check while this agreement is in effect.

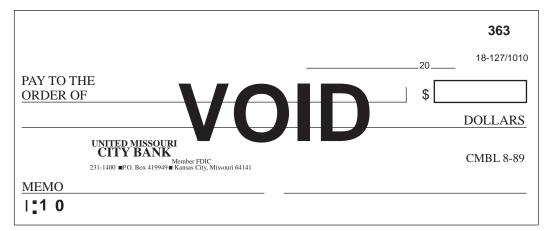
I understand that I have the right to cancel or terminate this agreement and such action will take effect when written notice of termination or cancellation from me is received at Union Security Insurance Company at the address stated below.

DATE

SIGNATURE

TELEPHONE NO.

FAX COMPLETED FORM AND PHOTOCOPY OF VOIDED CHECK TO 816.881.8558



Insurance products are underwritten by Union Security Insurance Company (USIC) (Kansas City, MO) and administered by Sun Life Assurance Company of Canada (SLOC) (Wellesley Hills, MA). Prepaid dental products are provided by USIC and are administered by SLOC, and are provided by certain prepaid dental companies affiliated with SLOC in certain states. Group Hospital Confinement Indemnity "Gap" or Supplemental Medical Expense "Gap" insurance is underwritten by Fidelity Security Life Insurance Company (Kansas City, MO) and administered by SLOC.

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