



Payment Instructions (Representative to Firm)

Representative name: _____

Representative number:

Individual insurance: _____ **Financial Services:** _____

Firm name: _____

Firm number:

Individual insurance: _____ **Financial Services:** _____

I hereby authorize Beneva Inc. to pay the above-mentioned Firm under the indicated numbers, all sales, trailer fee and renewal commissions that would be paid to me under my representative numbers indicated above.

Signature of the representative

Date