



ABS Billing  
One Tower Square  
Hartford, CT 06183  
1-888-616-8715

***DIRECT DEPOSIT / ELECTRONIC FUNDS TRANSFER (EFT)  
OF MONTHLY COMMISSIONS AND OTHER COMPENSATION  
FOR BUSINESS AND PERSONAL INSURANCE***

All direct bill commissions and all other forms of agency compensation, including fixed, value-based commission and contingent commission will be deposited directly to your bank account via electronic funds transfer.

Complete the form below and fax it, along with a **voided check** from the account into which you would like deposits made.

***Fax to: 1-877-896-0804  
or (860) 954-6331***

**Authorization for Direct Deposit of Monthly Commission and Other Compensation**

☐ New Enrollment

☐ Change

Agency Name: \_\_\_\_\_

Agency Telephone No: \_\_\_\_\_

Agency E-mail address: \_\_\_\_\_

Agency Contact Name: \_\_\_\_\_

Producer code (s) \_\_\_\_\_

Bank Name: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Bank Transit/Routing No. \_\_\_\_\_ Bank Account No. \_\_\_\_\_

Checking (\_\_\_) Savings (\_\_\_)

I hereby authorize Travelers to deposit my monthly commissions / compensation into my account at the bank designated above. I understand sending written notification to my local Travelers representative can revoke this authorization.

Depositor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please attach **VOIDED CHECK** here or to a separate page.