



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.