



Texas Farm Bureau Mutual Insurance Company  
Texas Farm Bureau Underwriters  
Texas Farm Bureau Casualty Insurance Company  
Farm Bureau County Mutual Insurance Company of Texas  
Southern Farm Bureau Life Insurance Company

**AssurancePay®  
RECURRING PAYMENT  
CHANGE OF BANK INFORMATION**

Please change the bank information on which my Recurring Payment is drawn. By signing below, I am authorizing Texas Farm Bureau Insurance Companies to deduct my premium payments from the bank below. My signature also confirms that I understand that the original **AssurancePay®** Recurring Electronic Funds Transfer (EFT) Terms of Agreement are still in force in accordance with the original **AssurancePay®** Enrollment Form which I previously signed and that I must allow a reasonable time for processing this change.

**Note:** Texas Farm Bureau membership dues are not payable via **AssurancePay®**.

Policy/Master Account Number \_\_\_\_\_ Policy Holder \_\_\_\_\_

Please change my Banking Information as shown below:

Bank Name \_\_\_\_\_  Checking  Savings

Bank Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Bank Routing Number \_\_\_\_\_ as shown on your check (not Deposit Slip).

Bank Account Number \_\_\_\_\_ Name on Bank Account \_\_\_\_\_

Change the day of the month premium is drafted from my Account to (must be the 1st through the 28th): \_\_\_\_\_

Signature of authorized signatory \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date \_\_\_\_\_

Attach a Voided Check from your checking or savings account in the area below or documentation from your Bank showing your Account number and the Bank Routing Number.

Return the complete change form to us by either:

	<b>FAX:</b>	<b>Delivery to Agent:</b>
ATTN: Policy Services-EFT Texas Farm Bureau Insurance Companies PO Box 2689 Waco, TX 76702-2689	1-254-751-8712	You may deliver this completed form to your local Texas Farm Bureau Insurance Agent

Attach check here:

