



Van Wagoner Companies, Inc.

(972) 331-6570 • Fax (972) 331-6599

*Check by Fax: **DO NOT** mail original item.*

Note: Faxed items received after 3:00P.M. Central Standard Time will post on the next business day.

Agency Name: _____

Agency Fax # _____

Insured's Name: _____

Policy # _____

Check # _____

Amount: \$ _____

CHECKS MUST BE PAYABLE TO: Van Wagoner Companies, Inc.

CHECKS MUST BE DRAWN OFF OF THE AGENTS BANK ACCOUNT, NOT THE INSUREDS. (This is an agreement between the agent and Van Wagoner)

1. PLACE ORIGINAL CHECK HERE
2. PHOTOCOPY
3. FAX COPY

BY SIGNING THIS FORM YOU AUTHORIZE Van Wagoner Companies TO USE THE INFORMATION PROVIDED ABOVE AS PAYMENT ON THE ABOVE POLICY. YOU ALSO AGREE THAT YOU ARE AN AUTHORIZED SIGNER ON THIS ACCOUNT.

AUTHORIZED SIGNATURE REQUIRED

DATE: _____
REQUIRED