KEMPER LIFE12115 Lackland Road • Suite 100 • St. Louis, MO 63146-4003

ELECTRONIC FUND TRANSFER AUTHORIZATION

with such payment to be drawn and cha	arged on theof each month. (1st - 28th allowed)			
agree that:				
is rejected or returned for any reason	n.			
If an electronic fund transfer is reject	ted, the premium to which	the electronic fu	ınd transfer relates will be in defau	ılt.
Signature of Depositor on Bank Records:		Date:		
Address of Depositor:				
City:		State:	Zip Code:	
Phone Number	District·		Agency.	