

**** REPRINTED FROM THE FORMS LIBRARY ****

AUTOMATIC DEDUCTION AUTHORIZATION

I authorize Safeco to initiate deductions from my bank account when payments are due for my Safeco account. I authorize the financial institution ("bank") listed on the enclosed check to accept the deductions initiated by Safeco.

I make this authorization subject to the following conditions:

- **Safeco may deduct payments from my bank account ON or AFTER the _____ of the month.**
- Safeco must notify me in writing about the amount of the first deduction and must notify me again whenever the deduction amount changes.
- I have the right to recover the amount of any erroneous Safeco deduction, either by check or as a credit to my account.
- I have the right to terminate this authorization at any time by notifying Safeco in writing.
- **Deductions should be made from the bank account listed on the enclosed down payment check.**

I attest that I am authorized to sign checks drawn on the bank account listed on the enclosed down payment check.

Signed _____

Date _____