## AUTOMÄTIC DEDUCTION AUTHORIZATION

|   | e Safeco to initiate deductions from my bank account when payments are due for my Safeco account. I authorize the institution ("bank") listed on the enclosed check to accept the deductions initiated by Safeco. |
|---|---|
| I make thi  | s 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. |   |
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Signed \_\_\_\_\_\_ Date \_\_\_\_\_

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