

## ELECTRONIC FUNDS TRANSFER REQUEST

To enroll in or update the banking information for electronic funds transfer (EFT) on your fixed or indexed annuity, please complete this form and return Pages 1-2 to Reliance Standard Life Insurance Company (RSL) using one of the methods below. If you do not provide Pages 1-2 to RSL, your request will not be processed until pages 1-2 are received. Please use one form per contract.







Reliance Standard – Retirement Services 1700 Market Street, Suite 1200 Philadelphia, PA 19103

## QUESTIONS? Call Customer Care at 1.800.435.7775

Contract Number	If additional security has been requested, you must indicate the PIN here in order for the transaction to be processed.							
SECTION 1   Contract Owner Information								
First Name	MI	Last Name						
Entity/Trust Name								
SSN/TIN Email Address			Phone N	umber				
Mailing Address*								
City								
*Required if mailing address is a PO Box:								
Street Address								
City			State	Zip				
SECTION 2   Joint Contract Owner Information								
First Name	MI	Last Name						
SSN/TIN Email Address			Phone Number					
Complete the address portion only if it is different than the owner's address.								
Mailing Address*								
City								
*Required if mailing address is a PO Box:								
Street Address								
City			State	Zip				

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	SECTION 3   Bank Information				
0	Update existing bank information already on file.				
0	Enroll in the electronic funds transfer process on an active annu	uity contract.			
Ac	count Name (as it appears on the account)	Bank Name			
Routing Number (Bottom left of check):		Account Number (Bottom center of check):			
	e of account: (Your name must appear on the account rder to process your request.)	Name of Account ->	→ Joe Smith 1234 1234 123 Any Street Any City, US 12345 □ Date □ Say to the order of □ S		
0	Checking - Please attach a voided check for the listed account.	Bank Name →	Dollars		
0	Savings - Please include a bank statement for the listed account.		:107198557: 1111111 1234  Transit /ABA No. Checking Account Number		
Plea	ase note when selecting EFT:				
•	RSL will use third party software to assist in validating the bank information, your payments will be sent to your address of reco				
•	A copy of a voided check, account statement, or signed letter by	y a bank officer is r	required to verify the information provided.		
•	Funds can only be deposited into a bank account with the same have both owners listed on the bank account.	e owner information	on as the RSL annuity contract. Jointly owned contracts must		
•	Payments cannot be made to third parties, a power of attorney	, or to the trustee o	of a trust.		
•	These instructions will apply to all Reliance Standard annuity cothis information.	ontracts owned by y	you and will remain in effect until you instruct RSL to replace		
	SECTION 4   You must complete this Section. Read this se	ection IN ITS ENTI	IRETY before signing.		
info	completing this form, and by my signature, below, I hereby autho rmation section of this form to the bank account specified. In the to initiate, if necessary, debit entries and adjustments for any cre	e event an overpay			
	Contract Owner Signature		Signature Date (MM/DD/YYYY)		
			/		
☐ Contract Joint Owner	Contract Joint Owner Signature (if any)		Signature Date (MM/DD/YYYY)		
	,		/		
bee cap	rder to sign on behalf of the owner, proper legal documentation n provided to RSL. If we do not have the correct documentation, acity in which you are signing on behalf of the owner below. As sner's account and will not be payable to you personally.	we will be unable t	to process your request until it is received. Please select the		
	O Power of Attorney O Guardian O Conservator O A	ssignee			
	Signature (If applicable)		Signature Date (MM/DD/YYYY)		

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