

**Regular Mail to:**  
Great-West Life & Annuity Insurance  
Company of New York  
Attn: RROC  
PO Box 173921  
Denver, CO 80217-3920  
Phone: (800) 905-1959  
Fax: (866) 745-5766

**Overnight Mail to:**  
Great-West Life & Annuity Insurance  
Company of New York  
Attn: RROC  
8515 E Orchard Road 8T2  
Greenwood Village, CO 80111  
Phone: (800) 905-1959  
Fax: (866) 745-5766



## ELECTRONIC FUNDS TRANSFER REQUEST FORM

**Part A - Policyowner's Authorization For Pre-arranged Credits** To: Great-West Life & Annuity Insurance Company of New York ("the Company") And To: The Depository Named Below ("the Depository")

*I authorize the Company to,*

1. Initiate credits to my bank account indicated in Part B as payments fall due. Each credit initiated will discharge the Company from its obligation therefore.
2. Initiate debits to the same account of any overpayment made in error or after my lifetime.

I authorize the Depository to credit, or debit, my account for any amounts initiated by the Company. I understand that this authorization will be in effect until the Company has received written notification from me that I no longer desire this service, or that I wish to change my Depository, branch, account number or mailing address, and the Company and the Depository have had reasonable time to act on my notification.

Policy Numbers(s):      E - \_\_\_\_\_ E - \_\_\_\_\_ E - \_\_\_\_\_

Group: \_\_\_\_\_

SSN: \_\_\_\_\_ Ext \_\_\_\_\_

### Part B - Banking Details

\_\_\_\_\_  
Name of Bank, Trust or other Depository Institution

\_\_\_\_\_  
Trans / ABA

\_\_\_\_\_  
No.\* Bank Address (street & number / box number)

\_\_\_\_\_  
Bank City / Town, State, Zip Code

Account Type:   Ⓒ Checking (attach voided sample check)   Ⓒ Savings (attach deposit slip)

\_\_\_\_\_  
Account Number

\_\_\_\_\_  
Account Holder's Name

*\* obtain from your bank OR enclose "Voided" sample check*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Policyowner's Signature

\_\_\_\_\_  
Joint Policyowner's Signature (if applicable)

(      )  
\_\_\_\_\_  
Telephone Number

GREAT-WEST LIFE & ANNUITY INSURANCE COMPANY OF NEW YORK

*The principal underwriter is GWFS Equities, Inc., a wholly owned subsidiary of Great-West Life & Annuity Insurance Company and an affiliate of Great-West Life & Annuity Insurance Company of New York.*

**Electronics Funds Transfer Request**

Last Updated 01/2016

**Part C - Bank Confirmation (Verification of Banking Details)**

\_\_\_\_\_

Date

\_\_\_\_\_

Authorized Bank Signature

*Note: Please have the Banking Details confirmed by your bank ONLY if your account does not have checking privileges, or you have not attached a sample check marked "Void"*

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