



Right Care. Right Choice. Right Now.

Electronic Fund Transfer

Righter Insurance, LLC will deposit your Molina commission check directly to your bank account. We will make the deposit according to the current Molina Commission Deposit Schedule. Below is an authorization for you to sign up for this service.
Just complete this form and return.

Fund Transfer Authorization

I (We) do hereby authorize the deposit of all Molina commission payments due to me (us) to my (our) check account indicated below and for the Depository Financial Institution named below to credit the payment(s) to such account by Righter Insurance, LLC.

Account Number

Routing Number

Financial Institution Name

City

State

I (We) reserve the right to revoke and cancel this authorization.
Such revocation and cancellation to take effect upon written notice received at the office of Righter Insurance, LLC with reasonable time to act on such notice.

Agent Signature

Agent Number (if known) / NPN

Date

ATTACH A BLANK VOIDED CHECK HERE
(Deposit slips are NOT acceptable)