

**Genesee Patrons Cooperative Insurance Company**

218 East Main Street
Batavia, New York 14020-2282
Phone (585) 343-7307
Email: accounting@gpins.net

INVOICE CLOUD AUTOPAY PLAN

Genesee Patrons is pleased to offer an **AutoPay Plan**. With AutoPay, you can pick from 3 payment plans and the payment will be automatically drafted from either your checking account or credit card. To sign up or make changes to your plan, please send this form to accounting@gpins.net. You can also register for Invoice Cloud Autopay by going to www.gpins.net, clicking "Pay your Premium", Invoice Cloud & Autopay registration (no form required).

CHOOSE PAYMENT METHOD

Installment Plan	Amount Billed	Fee	Billing Schedule
<input type="checkbox"/> 1 (Annual)	100% Paid on due date	No Fee	Paid in full on initial due date
<input type="checkbox"/> 2 (Semi-Annual)	50% Each + Fee	\$4.00 on 2 nd installment	1 st : Original due date 2 nd : 180 days from effective date
<input type="checkbox"/> 4 (Quarterly)	25% Each + Fee	\$4.00 on 2 nd , 3 rd , & 4 th installments	1 st : Original due date 2 nd : 90 days from effective date 3 rd : 180 days 4 th : 270 days

Policy Number: _____

Name on Account/Card: _____

Billing Address Associated with Account/Card: _____

ACH PAYMENT (Electronic Withdrawal)

Bank Name: _____

Routing # (9 digits)*: _____ Account #: _____

*Routing number can be found between the "I: I:" symbols at bottom of check.

CREDIT CARD PAYMENT

Card Type: ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover

Card Number: _____ - _____ - _____ - _____ Exp. Date: _____ Security Code: _____

Email Address (highly recommended, but not required): _____

*Email addresses will be used to notify policyholders of funds withdrawal dates, expiring cards, etc.

Signature Authorization: By signing below, you are authorizing GP to draft funds from the account/credit card indicated above. **All payments will be drafted 3 days prior to the due date.**

Print Name_____
Signature_____
Date