**Section 4415.ILLUSTRATION B Designation for Automated Clearing House Payment of Compliance Annual Fees**

Illinois Department of Insurance

Public Pension Division

Designation for Automated Clearing House

Payment of Annual Compliance Fees

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Depository Name: | | | |  | | | | | | | |
| Account Name: | | |  | | | | | | | | |
| City: |  | | | | | | State | |  | Zip Code |  |
| Routing Transit Number of Depository Above: | | | | | | | |  | | | |
| Account Number to be Debited: | | | | |  | | | | | | |
| Authorized Pension Representative: | | | | | |  | | | | | |
| Phone Number: | | |  | | | | | | | | |
| Signed: | |  | | | | | | | | | |
| Dated: |  | | | | | | | | | | |

(Source: Amended at 30 Ill. Reg. 13176, effective July 24, 2006)