



American Freedom Insurance Company  
 1699 Wall Street, Suite 600 Mount Prospect, IL 60056  
 Phone: (847) 758-9300

## DIRECT BILL SWEEP ACCOUNT FORM

FAX: (847) 758-9685  
**ATTN: ACCOUNTING**

BROKER NAME: \_\_\_\_\_  
 BROKER #: \_\_\_\_\_

DATE: \_\_\_\_\_

POLICY #	INSURED'S NAME	ADDRESS	PAY CODE	\$ AMOUNT
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<b>TOTAL AMOUNT TO BE SWEEP</b>				\$

**PAY CODES:**

- 1 = NEW BUSINESS DOWN PAYMENT
- 2 = INSTALLMENT
- 3 = REINSTATEMENT
- 4 = ENDORSMENT
- 5 = RENEWAL DOWN PAYMENT