

REIMBURSEMENT FORM

1. Agent's Name:

2. Name of the Master General Agency (MGA):

3. Qualification Type 50% ☐ 100% ☐

4. Country of residence:

BANK INFORMATION

5. Bank name:

6. Account number:

7. ACH/ABA/Routing:
(Only applies for U.S. banks)

8. IBAN:

(Only applies for Bank of America accounts in the U.S.)

9. Código Swift:

(Only applies for foreign accounts outside the U.S.)

10. Beneficiary's Name

FOR INTERNAL USE ONLY

Amount to be reimbursed

Date: