

FastCash Direct Deposit Form

The process is simple

For each pay period, instead of printing paychecks, FastCash will electronically transmit a record of your pay to a financial institution of your choice. Each record is entered into the Automated Clearing House (ACH) system. At ACH, the deposits are sorted and electronically forwarded to your financial institution for credit to your account. You will continue to receive your commission statement twice each month. If you are an active career agent (career sampling/college intern or full-time career contract) and you have no debt, you will no longer receive your statement in the mail. You will be able to view your voucher on FieldNet as a PDF.

Select your account(s)

MassMutual and your affiliated broker dealer's net pay can be direct deposited to the same checking account or savings account, or separate bank accounts.

If you elect to include your registered business compensation (including compensation relating to MassMutual's variable products) in this direct deposit authorization, the account to which your funds will be deposited must be a personal checking or savings account. Securities compensation cannot be directly deposited to a corporate (or other entity) account.

Bank Routing Number Account Number

Routing number (9 digits) and account number for a checking account can be found on the bottom left of your check as shown. (Do not use a deposit slip to obtain your routing number.) To find the routing number for a bank at which you have a savings account, please contact your bank.

MassMutual (non-registered)

Direct my MassMutual non-registered compensation to the account listed below. (Personal or corporate checking/savings account)

Select one:

Checking account Savings account

*Routing #

*Account # _____

Bank or Financial Institution's Name _____

Registered Business

I currently am (or intend to become) a registered representative. Direct my registered business compensation to the account listed below. (Personal checking/savings account only)

Select one:

Checking account Savings account

*Routing #

*Account # _____

Bank or Financial Institution's Name _____

Questions concerning FastCash?

Call us direct at 1-800-767-1000, ext. 48850. We will be happy to answer any questions or concerns you might have, Monday through Friday, 8 a.m. to 6 p.m., ET.

How to enroll or terminate the agreement

Completely fill in the authorization form below and mail, fax, or e-mail to:

Massachusetts Mutual Life Insurance Company
FastCash
1295 State Street – D114
Springfield, MA 01111-0001
Fax: 1-888-388-3661
E-mail: EDSHub2@massmutual.com

NOTE: I acknowledge that MassMutual and my affiliated broker dealer may at any time change the rules for participation in this program and that as a participant in the program MassMutual and my affiliated broker dealer shall notify me of the changed rules and I shall have the option to discontinue the program if I do not want to be bound under the new rules. I authorize MassMutual and my affiliated broker dealer to deposit my net compensation into my account listed below. I also authorize MassMutual and my affiliated broker dealer to initiate debits to the bank account for payments made to me in error and the financial institution named below to debit my account and refund any such payments to MassMutual and my affiliated broker dealer. Payments made under this agreement shall fully satisfy MassMutual and my affiliated broker dealer's obligation to make payments to me.

Upon my death, my executors or administrators shall pay to MassMutual and my affiliated broker dealer, from my estate, the amount of any payments collected by the bank which were not payable because they were issued after my death.

Disclaimer

By signing below I certify that if I choose to include registered business compensation (including compensation relating to MassMutual's variable products) in this direct deposit authorization, the account to which my funds will be deposited is a personal checking or savings account (not a corporate or other entity account).

*Home Agency # *MM ID # _____

*Agent or company name (print) _____

*SSN or TAX ID

Phone number - -

E-mail address _____

*Authorized signature _____ Date _____

Termination of Direct Deposit

MassMutual - Please terminate my direct deposit agreement. **I elect future payments to be paid by check.**

Registered Business - Please terminate my direct deposit agreement with my affiliated broker dealer. **I elect future payments to be paid by check.**

*Marks required fields.