

Allotment Authorization



Authorization for Armed Forces Mutual to adjust monthly military allotment

If you have questions, contact Policy Services at 1-800-336-4538.

1. PAYER	Customer Number (if known)
Name (Last, First MI)	Social Security Number

2. SIGNATURE	
I hereby authorize Armed Forces Mutual to contact the Defense Finance and Accounting Service (DFAS) on my behalf to start, increase, decrease or stop payments to Armed Forces Mutual for charges I have agreed to pay by allotment from my military pay.	
Payer Signature	Date Signed (mm/dd/yyyy)

When completed, email to: PolicyServices@aafmaa.com or fax to: 1-888-210-4882.