

Allstate Agent Signature Form

(For use by Exclusive Agencies, Exclusive Financial Specialists and Financial Specialists)

Instructions:

- Please provide your signature as you want it to appear on your customer's MCD (new business, renewal, and amended Policy Declarations), and TaG mailings.
- Use either a black roller ball pen (preferred) or a medium point black felt-tip pen.
- You must return this original form to Allstate Imaging Agent Signature.
- We cannot accept copies.
- Please allow 4 weeks processing time from the receipt of this form.

, :	Signature <u>N</u>	<u>/IUST</u> begin within shade	d area and	fit within	the box			
Print wh	nat you hav	e just signed:						
COMP	LETE THE	AGENT INFORMATION	SECTION	BELOW	:			
AGENT	INFORMA	TION:						
I	Last 5 digit							
	Agent Nam	e				 	 	
ĺ	Email Addr	ess				 	 	
(Office Area	Code/Phone Number		_	_			
Return f	form to:	Allstate Insurance Com 8711 Freeport Pkwy No Irving, TX 75063	_			 	 	

Attn: Allstate Imaging - Agent Signature MS #21