

**IRON WORKERS LOCALS 40, 361 & 417 ANNUITY, PENSION, TOPPING OUT
AND VACATION FUNDS**
451 PARK AVENUE SOUTH, NEW YORK, NY 10016
PHONE # (212) 684-1586
FAX # (212) 779-3076

AUTHORIZATION AGREEMENT FOR ELECTRONIC DIRECT DEPOSIT

PLEASE COMPLETE FORM AND RETURN TO THE FUND OFFICE

BANK NAME: _____

ABA/ROUTING NUMBER _____

ACCOUNT #: _____ CHECKING ___ SAVINGS ___

SOCIAL SECURITY #: _____

PRINT NAME: _____

ADDRESS: _____

PHONE #: () _____

SIGNATURE: _____

I hereby authorize the Iron Workers Locals 40, 361 & 417 benefit fund to credit my account with the bank named above. If the Fund erroneously deposits funds into my account, I authorize the Fund to initiate the necessary debit entries, not to exceed the total of the original amount credited for the current period.

This authorization will remain in effect until the Fund has received written notification from me that it is to be terminated in such time and manner for the Fund to act on it. By my signature above, I authorize the bank to release any information to a representative of the Iron Workers Locals 40, 361, & 417 Fund Office that will expedite the electronic deposit of my annuity benefit.