

IRON WORKERS LOCALS 40, 361 & 417 PENSION FUND

451 PARK AVE SOUTH, NEW YORK, NY 10016

PHONE # 212-684-1586

FAX # 212-779-3076

AUTHORIZATION AGREEMENT FOR ELECTRONIC DEPOSIT

TAKE THIS AUTHORIZATION AGREEMENT TO YOUR BANK and have them complete the top part of this form with all information required, particularly the ACCOUNT NUMBER and the ABA NUMBER for electronic deposits.

TO BE COMPLETED BY FINANCIAL INSTITUTION

BANK NAME: _____

ADDRESS: _____

BANK PHONE # _____

CONTACT PERSON: _____

ABA # _____

ACCOUNT # _____ **CHECKING** __ **SAVINGS** __

PLEASE complete the bottom part of this form and return it to the Fund Office. The processing time for commencement of Electronic Deposit is approximately eight weeks. During the interim period a regular check will be issued and mailed.

TO BE COMPLETED BY PENSION RECIPIENT

SOCIAL SECURITY # _____

PRINT NAME _____

ADDRESS _____ **PHONE #** _____

SIGNATURE _____

I hereby authorize the Iron Workers Locals 40, 361 & 417 Pension 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 Pension Fund Office that will expedite the electronic deposit of my pension benefit.