Central Pennsylvania Teamsters Pension Fund

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Defined Benefit____ and/or Future Service____ and/or Retirement Income Plan___

Authorization Agreement For Automatic Deposits

I hereby authorize **THE CENTRAL PENNSYLVANIA TEAMSTERS PENSION FUND** to directly deposit my monthly pension benefit into

Bank Name:

_____ Checking account number _____

Bank ABA (ROUTING) No.: (contact your bank to obtain this 9 digit number)

OR

Savings account number _____

Bank ABA (ROUTING) No.: (contact your bank to obtain this 9 digit number)

Your Name:

SS#:

Your Phone No.:

Date:

Your Signature:

It takes 30 days for the direct deposit to go into effect. Therefore, your FIRST MONTHLY CHECK will be sent to your home address. If you are already receiving your benefits and are making a change to the account information already on file, your next check MAY be mailed to your home address.

Revised 8/3/17