

Authorization for Direct Deposit

A Member Information

Name _____ SSN _____

Home Address _____

City _____ State _____ ZIP _____

Check here if the address listed above is new or has recently changed.

Effective Date _____

Daytime Phone () _____ Cell Phone () _____ Home Phone () _____

Primary Email *(optional)* _____

B Direct Deposit

Name of Financial Institution _____

City _____ State _____ ZIP _____

Routing Number *(9-digit number)* _____

Member's Bank Account Number _____

Checking - A voided check with your primary name and address preprinted must be attached.

Savings - A deposit slip with your primary name and address preprinted must be attached.

The process for initiating or changing bank information can take up to two payment cycles. During this process, your benefit check(s) will be mailed to you.

C Authorization

On behalf of myself, my legal representative, and my executor or administrator, I authorize the electronic deposit of my benefit payment to the account listed above. I agree to repay the Board of Pensions any benefit amount erroneously credited to my account, and I authorize the Board of Pensions to offset from any death benefit payable to my estate, survivors, designated beneficiaries, or heirs at law any amount erroneously credited to my account under this authorization. This agreement shall survive the termination of the direct deposit authorization.

This authorization shall remain in effect until the Board of Pensions receives written notification from me of its termination in such a time and manner as to afford the Board of Pensions and the financial institution named above a reasonable opportunity to act on it.

I have attached the voided check or savings account deposit slip. If I do not return the necessary documents, I understand the electronic deposit of my payment may be delayed.

Member Signature *(required)* _____ Date *(mm/dd/yyyy)* _____

Please mail or FAX this completed form to:

The Board of Pensions of the Presbyterian Church (U.S.A.)
2000 Market Street, Philadelphia, PA 19103-3298
800-773-7752 (800-PRESPLAN) Fax: 215-587-6215
Pensions.org