

# ROOFERS LOCAL NO. 71 PENSION FUND

PH. (330) 779-8871 3660 STUTZ DR., SUITE 101, CANFIELD, OH 44406 FAX (330) 270-3582

## DIRECT DEPOSIT AGREEMENT

Name of Payee \_\_\_\_\_ Social Security No \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone No ( ) \_\_\_\_\_ BeneSys Code YV71

**Bank Account Information** – Attach a voided check from your account and/or complete the information below. See sample check at the bottom of the page for help completing this section. **PLEASE PRINT CLEARLY.**

Routing No.          Account No. \_\_\_\_\_

Type of Account: ☐ Checking ☐ Savings

### Financial Institution

Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone Number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I, the undersigned, hereby authorize the Board of Trustees of the Pension Trust Fund (“the Pension Fund”) to deposit all amounts due to me under the Pension Plan in my account at the Financial Institution named above. This authorization shall remain in force until I revoke it in writing or until my death, whichever occurs first. If at any time the Pension Fund should credit my account for a benefit to which I am not entitled, I authorize and direct the Financial Institution to refund the Pension Fund.

Payee Signature \_\_\_\_\_

Date \_\_\_\_\_

**Please allow up to 45 days for the direct deposit set-up process to be completed.**

**RUFUS MAPLE**  
**MARY MAPLE**  
123 Main Street  
Anyplace, LA 70000

PAY TO THE  
ORDER OF \_\_\_\_\_ \$  1234  
DOLLARS

ANYPLACE BANK  
Anyplace, LA 70000

For \_\_\_\_\_

Routing number (line 23b)  Account number (line 23d)

Do not include the check number

1:2502500251:202020\*\*86\*\* 1234

Note: The routing and account numbers may be in different places on your check.

