

**NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS BENEFIT PLANS**

**7570 Caple Blvd., Suite B / Northwood, Ohio 43619 / Telephone (419) 662-1388 / Fax (419) 662-1733**

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**DIRECT DEPOSIT CANCELLATION FORM**

I, \_\_\_\_\_, wish to cancel the direct deposit of my pension check from the Northwestern Ohio Plumbers & Pipefitters Pension Fund. I understand that my check will be mailed to my home address.

Current Address: \_\_\_\_\_  
\_\_\_\_\_

Social Security No.: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Before me, a Notary Public in and for said County and State personally appeared \_\_\_\_\_, who acknowledged the truth of the statement in the forgoing affidavit on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Notary Signature \_\_\_\_\_

Notary Name (please print) \_\_\_\_\_

County \_\_\_\_\_

State of \_\_\_\_\_

My Commission expires \_\_\_\_\_