



# BAY AREA PAINTERS AND TAPERS

## PENSION AND ANNUITY TRUST FUNDS

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### PENSION BENEFIT ELECTRONIC FUND TRANSFER REQUEST

- ***You MUST enclose a voided check for checking accounts OR a savings deposit slip for savings accounts.***
- This form **MUST** be **signed and dated**.
- It may take up to 4-6 weeks to process your EFT, during which time your check will be mailed to your home address.
- **Please be advised that this office cannot send funds to foreign banks.**

If you have any questions, please contact the Trust Fund Office at the phone number indicated above.

#### ACCOUNT INFORMATION

**SELECT ONE:**  Checking Account **OR**  Savings Account

Bank Name: \_\_\_\_\_ Bank Phone Number: \_\_\_\_\_

Branch Address: \_\_\_\_\_

**Routing Number:** \_\_\_\_\_ **Account Number:** \_\_\_\_\_



As benefit payments become due to me from the Pension Plan, I authorize the Pension Plan Administrative Office to pay by directing the electronic transfer of funds, (or if not available, by direct mail of a check) to the order of the above-named financial institution for credit to my account. I authorize said financial institution to refund an amount equal to any payments which become due after my death that have been credited to my account or to charge the account accordingly. I reserve the right to cancel this authorization and direction by giving written notice to the Pension Plan Administrative Office.

I will notify the Pension Plan Administrative Office in writing regarding a change in permanent residence and advise, at that time, if checks are to continue to be sent to the financial institution named above.

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_  Check this box if address is new

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