

Return To:
BAC Local Union 15 Pension Fund
3100 Broadway Suite #805
Kansas City, MO 64111

BAC LOCAL UNION 15 PENSION FUND

Direct Deposit Authorization

Participant's Authorization – Please fill out and return to the Fund Office

I authorize you and the financial institution below to initiate electronic credit entries and, if necessary, debit entries and adjustments for any credit entries in error to my:

Checking Account

Savings Account

This authority will remain in effect until I have cancelled it in writing.

Name (Please Print) _____

Social Security Number _____

Home Phone Number _____

Financial Institution _____ Branch _____

City _____ State _____

Phone Number of Financial Institution _____

Transit Routing Number

--	--	--	--	--	--	--	--	--	--

ABA

Account Number _____

Participant's Signature _____

Date _____

Staple Voided Check Here ↑