

DIVISION 1181 A.T.U. – NEW YORK EMPLOYEES PENSION FUND  
101-49 Woodhaven Boulevard, Ozone Park, N.Y. 11416  
(718) 845-5800 FAX: (718) 641-0122

AUTHORIZATION AGREEMENT  
FOR AUTOMATIC DEPOSITS (ACH CREDITS)

I hereby authorize Division 1181 A.T.U. – New York Employees Pension Fund (“Fund”) to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my checking or savings account indicated below, and this depository named below (depository) to credit and/or debit the same such accounts.

PARTICIPANT’S BANK \_\_\_\_\_  
PLEASE PRINT

BANK ADDRESS \_\_\_\_\_  
STREET ADDRESS

\_\_\_\_\_ CITY STATE ZIP CODE

CHECKING ACCOUNT # \_\_\_\_\_  
(ATTACH VOIDED CHECK)

SAVINGS ACCOUNT # \_\_\_\_\_

\*\*\*To be completed by participant’s bank\*\*\*

TRANSIT/ABA NO. \_\_\_\_\_

This authority is to remain in full force and effect until the Fund has received written notification from me of its termination in such time and in such manner as to afford the Fund and Depository a reasonable opportunity to act on it.

PARTICIPANT’S NAME: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_  
PLEASE PRINT

SIGNATURE: \_\_\_\_\_ PHONE #: \_\_\_\_\_

DATE: \_\_\_\_\_

PLEASE RETURN TO: \_\_\_\_\_