

SAN DIEGO ELECTRICAL PENSION TRUST P.O. Box 231219 SAN DIEGO, CA 92193-1219 (858) 569-6322 (800) 632-2569



ELECTRONIC DEPOSIT AUTHORIZATION (ACH CREDITS)

I/we hereby authorize the San Diego Electrical Pension Trust, hereafter called COMPANY, to initiate credit entries of all benefit payments due me or my designated beneficiary to the financial institution listed below. If a payment is received <u>after</u> notification of my or my beneficiary's death, the financial institution shall return the payment to the COMPANY.

I/We further authorize the financial institution to debit my/our account and return to the COMPANY all amounts requested pertaining to benefit payments made in error at any time and all amounts requested pertaining to benefit payment(s) made in error at any time or following my/our death to which I/we were not entitled. This authorization is to remain in full force and effect until the COMPANY has received written notification from me or my designated beneficiary of its termination in such time and in such manner as to afford the COMPANY and the receiving financial institution a reasonable opportunity to act on it.

| Date | Date |
|--|--|
| Retiree's Name (Please print) | Spouse/Beneficiary's Name (Please print) |
| Retiree's Signature | Spouse/Beneficiary's Signature |
| Retiree's Soc. Sec. Number | Spouse/Beneficiary's Soc. Sec. Number |
| Type of Account: Checking ☐ Savings ☐ | |
| Account | Routing & Transit # |
| To ensure accuracy <u>please attach a VOIDED</u> provide you with these numbers. | CHECK or ask your financial institution to |
| Name of Financial Institution | |
| Address of Financial Institution | |
| City/State/Zip Code | |
| PLEASE CHECK ONE: | |
| 1 ST AUTHORIZATION FOR | NEW ACCOUNT / REPLACE |