

OPERATING ENGINEERS TRUST FUNDS



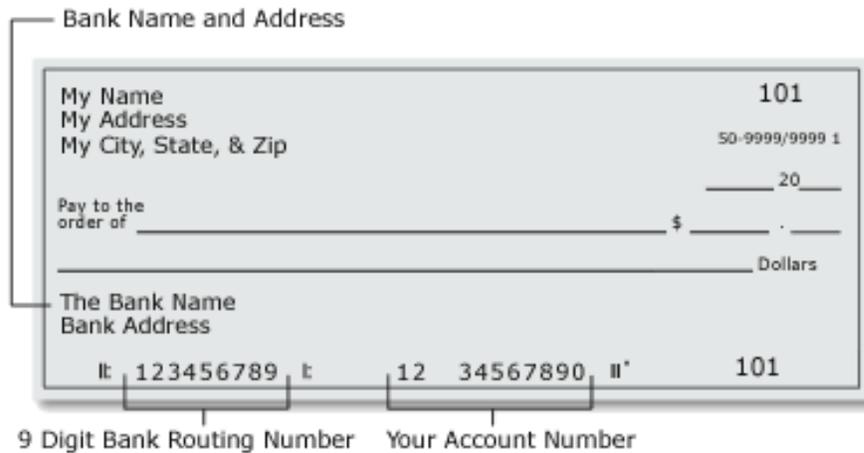
I.U.O.E. LOCAL 12 HEALTH & WELFARE / PENSION / VACATION / DCP

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 P.O. BOX 7063, PASADENA, CALIFORNIA 91109
 TTY: (626) 356-3582 WEBSITE: www.oefi.org

Authorization for Direct Deposit of Pension Check

Personal Information			
Social Security Number/OE ID	Last Name	First Name	Middle
Mailing Address			
City	State	ZIP Code	Home Phone # ()
Bank Account Information – Checks can only be deposited to one account			
Type of Account: <input type="checkbox"/> Checking (attach voided check) <input type="checkbox"/> Savings (attach voided deposit slip)			
Bank or Financial Institution		Branch	
Address		Phone	
9 Digit Bank Routing Number		Your Account Number	

Attach here



I hereby authorize the Operating Engineers Pension Trust to make direct deposits and, if necessary, correct any such deposits by making adjustments to my account at the bank or financial institution I have indicated on this form. I understand that this authorization will remain in effect until the Operating Engineers Pension Trust has received written authorization from me of its termination in such time and such manner as to afford them and the bank or financial institution a reasonable opportunity to act on it. I hereby authorize and instruct said financial institution to refund to the Operating Engineers Pension Trust an amount equal to any payments which, after my death, have been credited to my account and, if applicable, to charge my account accordingly.

Participant's Signature (required)	
X	Date ____/____/____