



Electricians Health, Welfare & Pension Plans

I.B.E.W. LOCAL UNION NO. 995
8111 TOM DRIVE BATON ROUGE, LOUISIANA 70815
(225) 927-6340 FAX (225) 927-6344
1-800-324-0995



AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS (ACH CREDIT)

I herby authorize IBEW LU 995 Pension Plan to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my/our _____ checking _____ savings account (account number below) at our financial institution (named below), and to credit and/or debit the same to such account.

Financial Institution:

Name _____ Phone _____

Address _____

Routing Number _____ Account Number _____

This authorization is to remain in full force and effect until the IBEW LU 995 Pension Plan has received written notification from me of it's termination is such time and in such manner as to afford the IBEW LU 995 Pension Plan and my Financial Institution a reasonable opportunity to act on it. This authorization supersedes and rescinds all prior authorizations.

IBEW LU 995 Pension Participant Name: _____
(Print)

Social Security Number: _____ - _____ - _____

Signature _____ Date _____

Spouse Signature _____ Date _____
(if joint acct)