



Bricklayers & Trowel Trades International Pension Fund

620 F Street, N.W. Suite 700 Washington, DC 20004

Phone (888) 880-8222 Fax: (202) 347-7339 <http://www.ipfweb.org>

ELECTRONIC DEPOSIT OF YOUR MONTHLY BENEFIT

If you are currently receiving IPF benefits via electronic deposit and have no changes please disregard this form

NAME : _____ SSN: _____ - _____ - _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ PH # (____) _____ - _____

Check Box If Your Address Has Changed

E-MAIL ADDRESS: _____

Name of Bank _____

City and State where your bank is located _____
(City) (State)

ABA Routing # _____ Acct# _____ Checking Savings

(Your bank's ABA# is always 9 digits long)

If you intend to deposit your benefit to your checking account, the Fund recommends that you include a **VOIDED** personal check to ensure accuracy and hasten the processing of your application.

I request that the Bricklayers and Trowel Trades International Pension Fund electronically deposit my monthly benefit to my bank account. I agree to direct my bank, executors, or next of kin to refund any electronic transfer payments made after my death. I understand that any benefits payable to my spouse or beneficiary will be paid to them in their name.

(Signature of Pensioner)

(Date Signed)

AN EXAMPLE OF HOW TO FIND YOUR ACCOUNT AND ABA NUMBERS ON YOUR PERSONAL CHECK.

John or Mary Doe 100 Main St. Anytown, USA 12345	_____ 19 _____	0501
PAY TO THE ORDER OF	_____ \$ <input type="text"/>	
	_____ Dollars	
FIRST NATIONAL BANK Anytown, USA For _____		
: 123456789 : 9876 4321 0501		

Routing # (always 9 digits)

bank account number

the individual check # (Do not include)

IF YOU HAVE ANY QUESTION CALL 1-(888) 880-8222 AND ASK FOR THE IPF PENSION PAYROLL DEPT.