



ELECTRONIC FUNDS TRANSFER OF ANNUITY PAYMENTS **EFT**

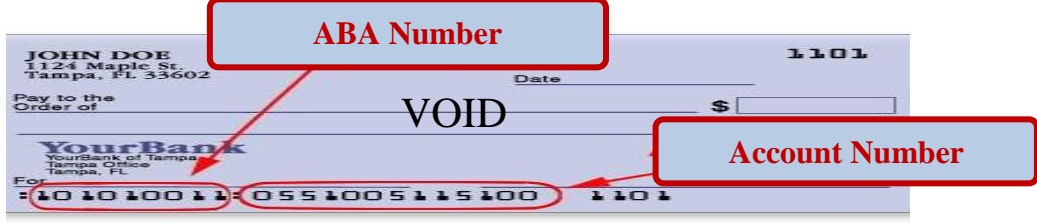
Please complete this form to have the YWCA Retirement Fund send your net annuity payments directly to your bank.

I. Annuitant Information NEW Direct Deposit Form CHANGE of Financial Institution

Annuitant Name (First, Middle, Last)		Social Security Number	
Home Address (Street)		Date of Birth: (MM/DD/YYYY)	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male
(City, State, Zip)		E-mail:	
(area code) Home Telephone Number	(area code) Work Telephone Number		

II. Annuitant Authorization

As payee, I hereby authorize the YWCA Retirement Fund and the bank I have listed below to electronically deposit the net amount of my annuity payment automatically into my bank account each month.



Bank Account Number: _____ Check one: Checking Savings

Bank ABA Number (9-digit Number): ____/____/____/____/____/____/____/____/____/____

Bank Name: _____

Branch Address: _____
(Street City State Zip)

Attach your VOIDED check (optional)

III. Signature of Participant

I certify I am entitled to the payment identified above. In signing this form, I authorize my payment to be sent to my financial institution and deposited to my designated account until further notice. To avoid interruption, such notice will be at least 30 days prior to allow reasonable time to process a change in financial institutions. To change my financial institution, I must complete and submit a new EFT.

I authorize amounts transferred after my death or transmitted in error to be debited from my account.

► Signature _____ Date _____