



SOUTHERN CALIFORNIA PIPE TRADES VACATION & HOLIDAY FUND

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NORMAL BENEFIT ELECTION
AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT (ACH CREDITS)
NO FEE IS CHARGED FOR THIS SERVICE

I hereby authorize the Southern California Pipe Trades Vacation & Holiday Fund (the "Fund") to pay my normal plan benefits (in December and April, or my free annual interim withdrawal) to my bank account indicated below.

If any payment is deposited to the account, and if I am not entitled to such payment for any reason, I hereby authorize the Fund to directly debit my account and to direct the financial institution to refund to the Fund the amount of any such payment.

To insure my deposits will be properly credited I authorize the financial institution indicated to confirm to the Fund the accuracy of the specific financial institution and account information supplied below.

Table with 2 columns and 3 rows: Name of Financial Institution, Account Number, Your Phone Number, Transit/ABA/Routing Number, Type of Account, Social Security Number.

I understand that:

- 1. This authorization will remain in effect until the Fund has received written notification from me of its termination...
2. No fee is charged for this service. On the reverse of this page is a form to apply for the Monthly Benefit option...
3. Participants may switch between the Normal Benefit option and the Monthly Benefit option at any time.
4. I must be the owner or a co-owner of the bank account listed above.
5. I must attach a voided check (or deposit slip in the case of a savings account), or this form will be rejected
6. This form and attachment must be received by the Trust Fund Office by the 20th day of the month in order for a direct deposit to be made during the following month.
7. The account must be open and capable of receiving deposits at the time of the direct deposit.

X
Signature

Printed Name
(must be name of account holder)

Date

Please verify bank account data.
You must attach a voided check (or deposit slip for a savings account).