

**BANK CHANGE FORM**

**BMO Harris Bank, N.A.  
as Custodian for the  
Electrical Construction Industry Pension Plan**

Authorization Agreement  
For Direct Deposit of Pension Payments

Electrical Construction Industry Pension Plan  
Retirement Plan Name

92-0008-03-4  
Trust Account Number

I am payee in the above named plan and I hereby request that, until my written notice is received by the BMO Harris Bank, N.A., all payments be directly deposited into my account at the bank designated below.

Financial Institution: \_\_\_\_\_

Address: \_\_\_\_\_

City & State: \_\_\_\_\_ Zip: \_\_\_\_\_

For Deposit To:

Checking \_\_\_\_\_  
Bank Routing Number Account Number  
***(PLEASE ATTACH A VOIDED CHECK)***

Savings \_\_\_\_\_  
Bank Routing Number Account Number  
***(PLEASE ATTACH A DEPOSIT TICKET)***

To correct any overpayments credited to my account during or after my lifetime, I hereby authorize the bank designated to debit my account and to refund any such overpayment to the BMO Harris Bank, N.A. as custodian for the Electrical Construction Industry Pension Plan.

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date