REQUEST FOR DIRECT DEPOSIT

IMPORTANT: YOU MUST COMPLETE, SIGN AND RETURN THIS REQUEST IF YOU WOULD LIKE TO RECEIVE YOUR CUPP CHECK PAID BY DIRECT DEPOSIT INSTEAD OF A PHYSICAL CHECK.

Check <u>one</u> of the following (if an election is not made, or if this form is not returned, a physical check will be issued): **BANKING INFORMATION** – Please attach a voided check or a direct deposit authorization form. Your name, routing number and account number must be preprinted on the documentation you provide from your financial institution. **SEND A PHYSICAL CHECK**

THIS IS FOR THE CUPP PROGRAM ONLY. THIS IS UNRELATED TO YOUR VACATION CHECK

SOCIAL SECURITY NUM	OCIAL SECURITY NUMBERUBC NUMBER												
PARTICIPANT DATE OF BIRTH		LOCAL UNION NO.											
PARTICIPANT PHONE NUMBER ()													
PARTICIPANT NAME													
	FIRST	MIDDLE INITIAL	LAST										
MAILING ADDRESS													
								-					
CITY	STATE 9 DIGIT ZIP CODE REQUESTED												

PARTICIPANT INFORMATION

You are authorized to mail my check or direct deposit voucher addressed to the undersigned to the above address. I agree that if I am not the person entitled to the benefits I will reimburse and indemnify the Western States Carpenters Vacation Trust. The undersigned hereby authorizes the Western States Carpenters Vacation Trust to make credit entries, and if necessary, to make debit entries as adjustments for any credit in error, to my bank account indicated.

PARTICIPANT'S SIGNATURE

DATE

Please email this completed form to: <u>web-vaca@carpenterssw.org</u> along with a copy of a voided check, voided deposit slip, or direct deposit letter from your bank.