

UNITED FURNITURE WORKERS Pension Fund A

P.O. BOX 100037
NASHVILLE, TN 37224

TEL: 615-889-8860
FAX: 615-391-0865

1910 AIR LANE DRIVE
NASHVILLE, TN 37210

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT (ACH CREDITS)

United Furniture Workers Pension Fund A

I hereby authorize UNITED FURNITURE WORKERS PENSION FUND A to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my checking/savings account indicated below and the depository (bank) named below, herein called DEPOSITORY, to credit and/or debit the same to such account.

DEPOSITORY NAME _____ BRANCH _____

CITY _____ STATE _____

ROUTING NUMBER _____ ACCT NUMBER _____

This account is **CHECKING** () Or **SAVINGS** () -- Please check one.

This authorization is to remain in full force and effect until UNITED FURNITURE WORKERS PENSION FUND A has received written notification from me of its termination in such time and in such manner as to afford UNITED FURNITURE WORKERS PENSION FUND A and DEPOSITORY a reasonable opportunity to act on it.

NAME _____ ID NUMBER _____
(Please Print)

DATE _____ SIGNATURE _____

(PLEASE ATTACH VOIDED CHECK OR DEPOSIT SLIP, which must include your name as the checking or savings account holder or joint account holder. If the deposit slip does not include a routing (transit) or account number, please obtain this information from your financial institution.)

**Please complete this form and
attach a voided check or deposit slip in order
to receive your monthly pension by the
first business day of the month.**