AUTHORIZATION FOR DIRECT DEPOSIT OF CITY OF HIALEAH EMPLOYEES' RETIREMENT PENSION PAYMENTS

RECIPIENT TO COMPLETE ITEMS A THROUGH H

but revokes all prior payment institution designated reserve authorization will remain in el	es the right to car	ncel this agree	ment by writte	en notice of m	e; however	, this	
written notice from me.	noot war are on	or malcarr E	inployees (te	aromonic oyou	om una our	isolog by	
						1.	
B. Pensioner's SS Number	V +					14 i 1 iii	
C. Mailing Address of Pensi	oner						
						••	
D. Telephone Number							
E. Name of Bank/Institution				· · · · · · · · · · · · · · · · · · ·		•	
F. Address of Bank/Institutio	o n			Acct.	 		
			C	Routi		· .	:
G. Name and Number of De In the event of my death, I ha immediately, I further agree t allow for the normal process	ave informed my to notify this office	spouse and/o e of any chan	r beneficiary t	o notify the R	etirement C]S
·	· v						
H. Signature of Pensioner	Date				:. * .		
(IMPORTANT : After this auth Employees' Retirement Syste							