



Direct Deposit Authorization

First Annuitant/Joint Annuitant #1

Depository Name: _____ Account Number: _____
Account Type: Checking Savings Home Phone: _____

Bank Routing Number: _____ Bank Phone: _____
(Use the first 9 numbers on the bottom left side of your check or you may phone your bank for this information)

I, (Print Name) _____, an Annuitant named in this Application and Agreement do hereby authorize direct deposit of the Annuity Payment to the Account specified above at the Depository named above, along with any necessary adjustments to my account. This authorization is to remain in full force until Texas Presbyterian Foundation has received written notification from me of its termination in such time and in such manner as to afford Texas Presbyterian Foundation and Depository reasonable opportunity to act upon it.

SIGNATURE

DATE

Second Annuitant/Joint Annuitant #2

I, (Print Name) _____, an Annuitant named in this Application and Agreement do hereby authorize direct deposit of the Annuity Payment to the Account specified above at the Depository named above, along with any necessary adjustments to my account. This authorization is to remain in full force until Texas Presbyterian Foundation has received written notification from me of its termination in such time and in such manner as to afford Texas Presbyterian Foundation and Depository reasonable opportunity to act upon it.

SIGNATURE

DATE

- I do want to receive a Credit Advice in the mail each time a payment is made.
- I do NOT want to receive a Credit Advice in the mail each time a payment is made.

Attach voided check here

For office use only:	Reviewed in Maui ___/___/___ Initial _____
	Entered in Maui ___/___/___ Initial _____
	TPF Account # _____