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## Direct Deposit Authorization

**Would you like to receive your Pension Payment faster  
and at no extra charge?**

We are glad to be able to offer you **DIRECT DEPOSIT** to your checking or savings account (no matter who you bank with) **ABSOLUTELY FREE!**

**Please attach a voided check**

*Deposit slips will only be accepted for Savings Accounts*

*Requests will not be processed without a voided check for Direct Deposit to a Checking Account*

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### Authorization agreement for automatic deposits (ACH credits)

I hereby authorize the Fifth Third Bank, National Association, hereinafter called company, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries made in error to my checking/ savings account indicated below at the financial institution named below, hereinafter called depository, to credit and/or debit the same to such account. I have enclosed a voided check for your convenience.

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

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

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

Bank phone #: \_\_\_\_\_ Checking: \_\_\_\_\_ Savings: \_\_\_\_\_

ABA Routing #: \_\_\_\_\_ Account #: \_\_\_\_\_

This authority is to remain in full force and effect until company has received written notification from me of its termination in such time and in such manner as to afford company and depository a reasonable opportunity to act on it.

Name: \_\_\_\_\_ Retired from: Curative Care Network, Inc.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Social Security #: \_\_\_\_\_

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