

## DIRECT DEPOSIT OF PENSION PAYMENTS TO A US CHEQUING OR SAVINGS ACCOUNT

1: MEMBER INFORMATION			
First Name	Last Name		Employee ID
Street Address			
City	State	Zip Code	Telephone
2: FINANCIAL INSTITUTION INFORMATION			
NOTE: If you elect to have your pension payments to be deposited to an account at a US financial institution, the cost is to be paid by you, the member; not the UBC Staff Pension Plan. The cost is approximately \$6.25 plus postage (CAD) per payment. There may be additional processing fees on the US financial institution side; therefore please speak to your institution prior to completing this form.			
Bank Identification Number (BIN) (9 digits)	Account Number		Account Type
			□ Chequing □ Savings
Financial Institution Name			
Street Address			
City	State	Zip Code	Telephone
3. FINANCIAL INSTITUTION BRANCH VER	PIFICATION		
If your bank account specified above is a:  • Chequing account; please provide a void cheque along with this form			
<ul> <li>Savings account; please have your financial institution provide a stamp verification, sign and date this section</li> </ul>			
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Name of Authorized Officer (please print)		Title of Authorized Officer	
Signature of Authorized Officer X		Date (yyyy-mm-dd)	
4. MEMBER AUTHORIZATION			
Member Signature X		Date (yyyy-mm-dd)	

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