BMO Financial Group

BMO Harris Bank N.A.

Authorization Agreement for Direct Deposit of Pension Payments

BMO Harris Bank N.A. is pleased to offer you the availability of Automated Clearing House (ACH) for benefit payments that you receive.

ACH means that checks are not physically mailed; instead, funds are deposited to your designated financial institution account through a wire transfer. Our ACH Service ensures your benefit will be deposited on the payment date and eliminates concerns about your check being subject to postal delays. As a result, you will have use of the funds on the payment date.

To use this service or change your designated financial institution or account, complete the form below and return it to us at the address below. If completed correctly, you will become a part of the ACH System within 30 days. If your financial institution is not an ACH member, a physical check will be sent for deposit to your designated account.

_____

Name of Former Employer

I am a retiree from the above named company and I hereby request that until my written notice is received by **BMO Harris Bank N.A.,** all payments be directly deposited into my account at the institution designated below:

Bank Name: _____

Bank Address: _____

City, State & Zip: _____

For Deposit To: _____ _____

Account Number | Type of Account (checking or savings)

Bank Routing Number: _____

(First nine digits located on personal checks)

Please attach a voided check or deposit ticket here

Only for the sole purpose of correcting any overpayments credited to my account during or after my lifetime, I hereby authorize the institution designated herein to debit my account and to refund any such overpayment to the BMO Harris Bank N.A.

_____ _____

Name of Participant **(Please Print)** | Participant Street Address

_____ _____

Signature of Participant (If POA provide POA papers) | City, State and Zip Code

__(Only Last 4 Digits)_____ _____

Social Security Number of Participant | Signature of Joint Account Holder

_____

Home Phone Number

Please return this completed form to:

BMO Harris Bank N.A.,
Payments Department
PO Box 2977
Milwaukee WI 53201-2977
Fax (414) 341-2848
Phone 1-855-767-1590

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