



OKLAHOMA FIREFIGHTERS PENSION & RETIREMENT SYSTEM

4545 N. Lincoln Blvd., Suite 265

Oklahoma City, Oklahoma 73105-3407

1-800-525-7461 • 405/522-4600 • Fax (405) 522-4643

AUTHORIZATION FOR DIRECT DEPOSIT OF MONTHLY RETIREMENT CHECKS

State of _____)

Dept. Retired From _____

County of _____)

Payee's SSN _____

I, the undersigned _____, do hereby appoint _____ Applicant

_____ as my agent to receive, endorse, and (Name of Banking Institution here)

collect the recurring amount payable to me from the Oklahoma Firefighters Pension and Retirement System for the purpose of making direct deposits to my account in said banking institution. This authorization is not an assignment of my right to receive such payment. This authorization hereby revokes all prior payment directions given to the Oklahoma Firefighters Pension and Retirement System.

Mailing Address

Payee's Signature _____

(_____) Phone _____

Subscribed and sworn to before me this _____ Day of _____, _____.

My commission expires: _____ Notary Public _____

To be completed by Bank Officer

ACKNOWLEDGMENT OF RESPONSIBILITY FOR RETIREMENT CHECKS

I hereby declare and affirm that we, the undersigned bank, agree to accept payments for direct deposit to the account of the above-named retired member of the Oklahoma Firefighters Pension and Retirement System. I further understand that these payments will terminate with the last payment received before the death of the retired member. I hereby agree to notify and return to the Oklahoma Firefighters Pension and Retirement System any payments received after the death of the above-named retired member.

Current Address of Bank

Signature of Bank Official _____

Title _____

Date _____

Member's Account No. _____

Bank Transit No. _____

Checking [] or Savings []

Bank Phone No. (_____) _____

Note: The Retirement System will make direct deposits to those institutions that are members of an operational automated clearing house association. All other deposits will be made by mailing directly to the bank.

THIS AUTHORIZATION MAY BE REVOKED BY WRITTEN NOTICE FROM ANY OF THE CONCERNED PARTIES

(OVER)

Form 5 Rev. 11/99

DIRECT DEPOSIT INSTRUCTIONS

The Authorization for Direct Deposit of Monthly Retirement Checks (Form 5), must be completed in accordance with the following instructions, **IF** you want your monthly retirement check deposited directly into your bank account:

1. Complete the first section of the form and have your signature witnessed by a Notary Public. **DO NOT RETURN this form without a notary signature and seal.** This will delay your request. Since most banks have a notary, you could have the form completed in its entirety at your bank.
2. Be sure to complete the section requesting your home address. It is important for you to inform the Oklahoma Firefighters Pension and Retirement System, **IN WRITING**, when and if your home (mail other than your retirement check) address changes. If you notify the Retirement System of a change in address, be certain to indicate whether you want your checks to continue going to the same bank.
3. Your action here does not give your bank any authority except to receive and deposit your retirement checks into your account. You may cancel or change this authorization at any time by contacting the Oklahoma Firefighters Pension and Retirement System, **IN WRITING**. (You should also notify your bank of any action you take.)
4. An official from your bank **MUST COMPLETE THE SECOND SECTION** of this form, **ACKNOWLEDGMENT OF RESPONSIBILITY FOR RETIREMENT CHECKS**. This must be done prior to returning your form to the Retirement System officer otherwise it will be returned to you for completion and further delay your request.
5. If the Retirement System receives the form completed and notarized by the 15th day of any given month (after retirement), your benefit will be sent by electronic transfer beginning the same month.
6. **NOTE TO BANK OFFICIAL:** Please complete the **ACKNOWLEDGMENT** section in detail, including account number, bank ABA/Transit Number, and the account to receive the deposit. The Oklahoma Firefighters Pension and Retirement System will make a direct deposit to your bank using the facilities of the Mid-American Automated Clearing House Association. **IF** your bank receives deposits from this source. **IF NOT**, the retirement checks will be mailed through the postal system to your bank the last working day of each month and will include the Retirement System member's name and account number printed on them.
7. If your banking institution will not complete and sign the bottom of the Authorization for Direct Deposit of Monthly Retirement Checks Form, your monthly retirement check cannot be sent by electronic transfer. The retirement check would continue to be mailed through the postal system to your home unless you provide us with the bank's mailing address and account number.