



**MICHIGAN
CATHOLIC**
C O N F E R E N C E

**Lay Retirement
Authorization Agreement
Direct Deposit/Electronic Funds Transfer**

I hereby authorize Michigan Catholic Conference (MCC) to deposit my retirement benefit from the MCC Lay Employees' Retirement Plan (Plan) in to account identified below. I understand this will remain in effect until written notice of termination is given to the MCC. (Note: MCC is required to verify the information below with your bank/financial institution. If any information is incorrect, the electronic deposit of your check may be delayed. In that instance, a paper check will be mailed to address provided below until banking information is correctly verified with your bank/financial institution.)

If any deposits are made to my account subsequent to my death to which I am not entitled under the terms of the Plan, I hereby authorize and direct the bank/financial institution on behalf of my estate, my heirs, and my beneficiaries to refund said deposits to the Plan and to charge the same to my account. I further authorize the Bank to accept a written determination from a representative of the Michigan Catholic Conference that I was not entitled to any such deposits made to my account subsequent to my death.

Please print or type

Name of Bank/Financial Institution: _____
 Bank's Telephone Number: (____) _____ - _____ Type of Account: Checking or Savings
 Routing Number: _____ 9 digits Account Number: _____

IF CHECKING, PLEASE ATTACH A VOIDED CHECK HERE

Retiree or Beneficiary Information:

 Name Social Security Number _____ Telephone Number _____ (____) _____

Check here if new address _____
 Email Address _____

 Address City _____ State _____ Zip _____

 Signature _____ Date _____

Please contact the MCC at 1-800-395-5565 with questions. Mail this form to the Michigan Catholic Conference, 510 South Capitol Avenue, Lansing, MI 48933, or fax to (517) 316-3690, ATTENTION: Benefits Department