



CITY OF TUCSON
AUTOMATIC DEPOSIT AUTHORIZATION
FOR PENSION DEPOSITS

CITY OF TUCSON
HUMAN RESOURCES
DEPARTMENT
RETIREMENT OFFICE

I hereby authorize the City of Tucson Retirement Office and the financial institution named below to directly deposit my monthly pension benefit. Please fill out the following information and attach a voided check for verification purposes.

Name: _____ SSN: _____

Financial Institution: _____

Account Type: _____ Savings _____ Checking Account # _____

Signature: _____ Date: _____

For Retirement Office Use Only: ABA Routing Number: _____

MEMBER: PLEASE RETAIN THIS PORTION FOR YOUR RECORDS

Member Disclosure:

To ensure that your pension benefit is safely deposited into your bank account, the City will test your deposit information before proceeding with a direct deposit. This process normally takes one month. In the meantime, your check will be sent to your address of record, and you will be responsible for depositing your check into your bank account. In authorizing this requested automatic deposit, I understand that the City of Tucson is acting in good faith and cannot anticipate nor can it be responsible for any charges incurred by the member.

DATE SUBMITTED TO TSRS: _____

VOIDED CHECK ENCLOSED? YES NO