

**CITY OF BIRMINGHAM  
AUTHORIZATION AGREEMENT  
FOR AUTOMATIC DEPOSITS**

**TYPE OF REQUEST**     New Enrollment                       Change Account #                       Change Bank

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**IMPORTANT - For routing and account number verification purposes, please attach a voided or cancelled check. If depositing to a savings account, please attach a voided deposit slip.** Please return completed form and voided check to: City of Birmingham Finance Department, Payroll & Pension Administration, 710 20<sup>th</sup> Street North, Room 189, Birmingham, AL 35203

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I (we) hereby authorize the City of Birmingham to initiate credit entries **and** to initiate, if necessary, debit entries and adjustments for any credit entries to my (our) bank account as indicated below and the depository named below, to credit **and/or** debit the same to such account.

I understand and acknowledge that all pension benefit payments to City of Birmingham pensioners will be made strictly through **electronic** means. This authorization is to remain in full force and effect until the City of Birmingham has received **written notification** from me (or either of us) of **any change** to my (our) account **at least thirty (30) days prior** to the desired date of change.

Pensioner's Name (*Print*) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Soc Sec # \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Phone # \_\_\_\_\_ Type:     Cell             Home             Work

Pensioner's Signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse's Name - If Joint Account (*Print*) \_\_\_\_\_

Spouse's Signature \_\_\_\_\_ Date \_\_\_\_\_

Conservator's Name - If Applicable (*Print*) \_\_\_\_\_

Conservator's Signature \_\_\_\_\_ Date \_\_\_\_\_

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**DEPOSITORY (BANK) NAME:** \_\_\_\_\_

**BRANCH NAME** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_

**TYPE OF ACCOUNT:**

CHECKING ACCOUNT     SAVINGS ACCOUNT     PAY CARD\*

\* If you do not have a traditional bank account to facilitate your direct deposit, you will be issued a Compass Bank PaySource Pay Card.

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**FOR FINANCE DEPARTMENT USE ONLY**

Bank Routing No. \_\_\_\_\_ Acct No. \_\_\_\_\_

Department: \_\_\_\_\_ Set Up Date: \_\_\_\_\_ Set Up Completed By: \_\_\_\_\_