

# City of Los Angeles Pensioners Direct Deposit Instructions

1			2		
SOCIAL SECURITY NUMBER			PRINT - LAST NAME FIRST MIDDLE		
PENSIONER'S DIRECT DEPOSIT AUTHORIZATION CARD FOR: CONTROLLER, CITY OF LOS ANGELES					
TRANSIT ROUTING NUMBERS			ACCOUNT NUMBER		
3 2 2 0 7 8 4 9 3			3		
TRANSIT ABA CHECK DIGIT					
BANK NAME		BRANCH		TELEPHONE	
Los Angeles Police Federal Credit Union		O1 - VN		(818) 787-6520	
ADDRESS		CITY		STATE ZIP CODE	
P.O. Box 10188		Van Nuys		CA 91410-0188	
PLEASE SIGN AND CHECK APPROPRIATE BOX — SEE INSTRUCTION ON REVERSE SIDE					
1) I hereby authorize you to directly deposit my pension net amount into my checking or savings account as indicated above. I also					
5 authorize you to make corrections to my account to adjust for any errors in deposit.					
2) I hereby request that you continue to directly deposit my pension net amount, but into the new account indicated above.					
3) I hereby request that you no longer deposit my pension net amount into my designated checking or savings account.					
6 AUTHORIZED SIGNATURE — PENSIONER		DATE		APPROVING OFFICER — BANK	

**Note: Please allow up to eight weeks for your request to be processed.**

## Information on how to complete your City of Los Angeles Pensioners Direct Deposit form:

- Social Security No.** – Enter your 9-digit social security number (do not include dashes)
- Print Last Name, First Name & Middle Initial** – Enter your payroll name with LAPD or the City of Los Angeles
- Bank Account Number** – This information is located on the bottom of your LAPFCU checks. (View example provided)



You can also locate your account number (Member number) on the upper right hand corner of your Monthly Member Statement. (View example provided)

<b>Member No.</b>	<b>Social Security No.</b>	<b>Page</b>
2222222		1
Statement Period		
06/01/03 To 06/30/03		

- Checking or Savings** – Select Checking or Savings, if you are authorizing the Pension Department to credit your monthly payroll to your LAPFCU primary checking (S8) {see check sample above} or shares (S1) account {see statement exhibit above}
- BEGIN Direct Deposit:** Please deposit my retirement allowance directly in the account indicated below. I also authorize you to make corrections to my account for any errors in the deposit.  
**CHANGE Bank and/or Account:** Please change the direct deposit information to reflect my new bank and/or account number indicated below. (Please leave old account open until change is implemented.)  
**CANCEL Direct Deposit:** Please cancel the direct deposit of my retirement allowance and mail future checks to my address below. (Do not close your account until cancellation is implemented.)
- Authorized Signature:** Your signature is mandatory as you are authorizing the Pension Department act on this request. Sign and date this section.

Please complete, sign and mail form to LAPFCU, PO Box 10188, Van Nuys, CA 91410-0188, Attention: Member Services.

