MICHIGAN ELECTRICAL EMPLOYEES' VACATION FUND PAYEE DEPOSIT AGREEMENT

Your Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Social Security No.: _____ Telephone No.: _____

BANK INFORMATION

If you direct your vacation benefits into a checking account you may simply attach a copy of a voided check. If you direct deposit your vacation benefits into a savings account you may simply attach a personalized deposit slip that contains your account number.

Name of Financial Institution: _____

Type of Account: (Circle one) Checking Account Savings Account

ABA No.: _____ Account No.: _____

Branch: _____ Street Address: _____

City: _____ State: _____ Zip Code: _____

I, the undersigned, hereby authorize the Vacation Fund ("Vacation Fund"), to deposit all amounts due to me from the Vacation Fund in my account at the Financial Institution named above. This authorization shall remain in force until I revoke it in writing or until the Vacation Fund's receipt of notice of my death, whichever comes first. I also authorize the above named bank to return directly from my account to the Vacation Fund any amounts erroneously deposited in my account.

_____ Dated: _____
Signature

_____ Dated: _____
Witness

Please return *completed* form to: Michigan Electrical Employees' Vacation Fund
6525 Centurion Dr.
Lansing, MI 48917-7502
(517) 321-7502
(517) 321-7508 Fax