

IMPORTANT

ELECTRONIC FUNDS TRANSFER (EFT)

Due to enhanced security measures, EFT requests require either:

- a) Notarization* of the PWGA EFT Authorization form or
- b) Completion of a video call with a Plan representative in order to validate the identification of the payee.

*The Plan office will accept traditionally notarized forms (signed in person with a notary public) via US mail to the address below. Remote online notarized forms are only accepted via email at pensionbenefits@wgaplans.org.

ELECTRONIC FUNDS TRANSFER (“EFT”) AUTHORIZATION

Your monthly retirement benefit check can be electronically transferred to your account at your US Bank or other Financial Institution. To initiate this process, please provide the information requested. You may contact your Financial Institution or Bank for help completing Section 2.

YOUR EFT MAY TAKE UP TO 60 DAYS TO PROCESS. PLEASE NOTE THAT YOUR PAYMENT WILL BE MAILED TO THE ADDRESS ON RECORD WITH THE PLAN UNTIL YOUR EFT IS EFFECTIVE.

SECTION 1 PAYEE INFORMATION

FIRST NAME LAST NAME SOCIAL SECURITY NUMBER OR UNIQUE IDENTIFIER

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PARTICIPANT NAME, IF DIFFERENT THAN ABOVE

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PHONE NUMBER

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EMAIL ADDRESS

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SECTION 2 ACCOUNT INFORMATION

NAME ON ACCOUNT (NOT NAME OF FINANCIAL INSTITUTION)

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FOR A **TRUST** OR OTHER **THIRD PARTY** ACCOUNT, PLEASE ALSO COMPLETE THE THIRD PARTY TRANSFER FORM.

ABA (ROUTING) NUMBER, ONE NUMBER PER BOX

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ACCOUNT NUMBER

ACCOUNT TYPE

	CHECK ONE: <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS
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SECTION 3 PENSIONER ACKNOWLEDGEMENT

As payment becomes due me under the Producer-Writers Guild of America Pension Plan, I authorize that payment be made by Electronic Transfer by the Plan, to the order of the above Financial Institution for credit to the account held in my name as specified above. I agree to periodically furnish evidence of my survival. I have authorized said Financial Institution to refund to the Producer-Writers Guild of America Pension Plan an amount equal to any payments which, after my death, have been credited to my account, and if applicable, to charge my account accordingly.

PENSIONER OR PAYEE'S SIGNATURE

DATE

SIGN HERE	
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ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
 County of _____)

On _____, before me, _____ (insert name and title of the officer), personally appeared _____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity, and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____
 Notary Public Signature

(Seal)

THIRD PARTY TRANSFER FORM

This form is to be completed if you have entered into an arrangement to direct the Plan to pay plan benefit payments to a third party (including a Trust). You must obtain an acknowledgement from the third party and file it with the Administrative Office no later than 90 days after you authorize Electronic Funds Transfers to the account of the individual or third party named in Section 2. If the acknowledgement is not received before the 90-day deadline, benefit payments will be issued directly to you. You can revoke the arrangement at any time.

SECTION 1 PENSIONER INFORMATION

NAME

SOCIAL SECURITY NUMBER OR UNIQUE IDENTIFIER

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SECTION 2 THIRD PARTY INFORMATION

NAME OF INDIVIDUAL AND/OR ENTITY, IF APPLICABLE

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STREET ADDRESS

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CITY

STATE

POSTAL CODE

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TELEPHONE NUMBER

FAX NUMBER

E-MAIL ADDRESS

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SECTION 3 PENSIONER ACKNOWLEDGEMENT

I hereby acknowledge that I have directed the Plan to pay all or a portion of plan benefit payments to the individual or the representative of the third party named above. I may revoke this arrangement at any time by notifying the Plan but without giving notice to the representative of the third party. I recognize that the third party has no enforceable right in, or to, any plan benefit payment or portion of any plan benefit payment (except to the extent of payments actually received under the terms of the arrangement).

PENSIONER OR PAYEE'S SIGNATURE

DATE

SIGN HERE	
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SECTION 4 THIRD PARTY ACKNOWLEDGEMENT

I hereby acknowledge that the Pensioner named above has directed the Plan to pay all or a portion of plan benefit payments of the Pensioner to me as the third party named above in Section 2. The Pensioner may revoke this arrangement at any time by notifying the Plan but without giving notice to me as the third party. I recognize that as third party, I have no enforceable right in, or to, any plan benefit payment or portion of any plan benefit payment (except to the extent of payments actually received under the terms of the arrangement).

SIGNATURE OF THIRD PARTY

DATE

SIGN HERE	
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When will my EFT be effective?

Your EFT may take up to 60 days to process. You will receive a check mailed to your address on record until your EFT is effective. Funds will be available on the first business day of each month. Please note that if the completed EFT request is received by the 14th of the month; your EFT will be effective on the 1st of the following month. If the completed EFT request is received after the 14th of the month; your EFT will be effective on the 1st of the second month.

Why does it take so long for my EFT to start?

There is a pre-noting period before your actual EFT will begin. During the pre-note period, transfer of \$0 is sent to your chosen account. This is done to ensure that your account will receive the future pension payments with no problems.

Once I have EFT, when will my funds be available each month?

Your funds will be available on the first business day of each month.

Will I receive any notification that the funds have transferred?

Yes. You will receive a Deposit Confirmation around the first of each month.

When would I need to fill out a new EFT form?

You will need to fill out a new EFT form when you change your bank, your account number, or any other information about the account or Bank/Financial Institution. For your convenience, you may download the EFT Authorization form from our website at www.wgaplans.org. Your EFT may take up to 60 days to process. Please note that your payment will be mailed to the address on record with the Plan until your new EFT is effective.

How do I cancel my EFT if I change my mind later on and want to receive a check?

You will need to write a letter stating that you want to cancel your EFT, and would like to receive your payment as a check. For your convenience, you may fax your letter to (818) 526-6571. Don't forget to sign and date your letter. Please note that if the cancellation of EFT letter is received by the 14th of the month, it will be effective on the 1st of the following month. If the cancellation of EFT letter is received from the 15th of the month through the end of the month, it will be effective on the 1st of the second following month.

What if my account is a Trust or other Third Party Account?

You will need to complete the ELECTRONIC FUNDS TRANSFER ("EFT") AUTHORIZATION and the THIRD PARTY TRANSFER FORM. The trustee on the account also needs to sign Section 4 of the THIRD PARTY TRANSFER FORM.