



## Authorization for Direct Payment for Steelworkers Health and Welfare Fund Contribution

**OPEIU Local 45 Members Only**

Please print in blue or black ink.

| Part 1 - MEMBER INFORMATION |                          |       |     |
|-----------------------------|--------------------------|-------|-----|
| Member Name                 |                          |       |     |
| Spouse (optional)           |                          | SSN   |     |
| Street Address              | City                     | State | Zip |
| Telephone Number            | Email Address (optional) |       |     |

| Part 2 - BANK INFORMATION  |  |
|--|--|
| Name of Bank or Financial Institution  |  |
| Name as it appears on checking account                                       |  |
| Account from which you would like your payment to be automatically deducted: |  |
| <b>Please enclose a voided blank check<br/>with this authorization</b>       | <b>Account Number:</b> _____<br><br><b>Routing Number:</b> _____ |

| Part 3- AUTHORIZATION FOR DIRECT PAYMENT OF CONTRIBUTION   |      |
|--|------|
| I hereby authorize the Steelworkers Health and Welfare Fund to initiate an ACH Debit to my account for the contribution required for my health care benefits and authorize the financial institution to charge such withdrawals to my account. This amount may be adjusted to correct any overpayments or underpayments, or to reflect any charges by the financial institution due to insufficient funds in my account. I may discontinue enrollment in this direct payment option at any time by notifying the Fund Office in writing. |      |
| Signature  | Date |

To begin the automatic debit payment, please forward a copy of this completed form and a voided check to:

**OPEIU Local 45**  
**Steelworkers Health and Welfare Fund**  
 60 Boulevard of the Allies, 5th Floor  
 Pittsburgh, PA 15222

Please keep a copy of this authorization for your records. If you wish to terminate this direct payment option please notify the Eligibility Administration office at the above address.