



## **Special Pay Plan**

## **Account Authorization for Direct Deposit**

Your Special Pay Plan account distributions may be deposited directly into your account or joint account with your spouse at your bank or other financial institution. To sign up, please complete this form, and return it to the address listed at the bottom.

Employer Name:											
<b>Employee Information</b>											
Name:			Social Security Number:								
Street Address:											
City, State Zip:											
E-mail Address:			Phone Number:								
AUTHORIZATION:  I authorize MidAmerica Administr directly into my account until I give from the time MidAmerica processe	further written notice to	MidAmer	ica. I und	erstan	d that	it m	ay take				
Signature Date				ie e							
Bank Account Information											
Bank Name:	Bank Tel	elephone Number:									
Bank Address:			1								
Account Type: (check one) Checking (Attach voided check) (At			_ Savings tach voided deposit slip)								
Transit Routing Number Account Number											
Type of transaction (check one):											
☐ New request for Direct Depos	sit										
☐ Change current Direct Deposit	it information										
Cancel Direct Deposit											

Submit completed form and attachments to:
MidAmerica Administrative & Retirement Solutions, Inc.
Dept. SP Admin
211 East Main Street, Suite 100
Lakeland, FL 33801