

**The Local 7 Tile Industry Supplemental Fund**

**253 West 35th Street, 12<sup>th</sup> Floor**

**New York, NY 10001**

Phone: (212) 505-5050 Fax: (646) 381-8839

Email: applications@dhcook.com

**DIRECT DEPOSIT FORM**

Please use *ink only* to complete the following information and sign at the bottom.

MEMBER'S FULL NAME \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_  
LAST NAME FIRST NAME

SOC. SEC. NO. \_\_\_\_--\_\_\_\_--\_\_\_\_ PHONE NO. \_\_\_\_\_ CELL NO. \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_  
CITY STATE ZIP EMAIL

STATUS:  SINGLE  MARRIED  WIDOWED  DIVORCED  LEGALLY SEPARATED

Do you want your Supplemental check deposited directly into your account? \_\_\_ Yes \_\_\_ No

*If yes, attach a voided check here*

For a SAVINGS account, please attach a letter from the bank indicating your Account and Routing #.

This authorization will be in effect until the FUND receives a written termination notice from myself and has a reasonable opportunity to act on it.

Signature: \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_  
*Information will not be processed without signature!*