

## Direct Deposit Authorization Agreement

**COMPLETE THIS FORM, SIGN AND RETURN BY  
MAIL, FAX, OR EMAIL to [info@afmsagaftfund.org](mailto:info@afmsagaftfund.org)**

Please indicate whether this is:

- New Authorization
- Change Authorization

Please specify to which account deposit is to be made:

- Checking Account – Personal
- Savings Account – ***please include deposit slip with account number***
- Checking Account – Business/Trust – ***please include W-9***

**If you desire that your payments be made to any entity other than yourself, you MUST include a Letter of Direction so stating, along with a W-9 Form.**

ROUTING NUMBER

ACCOUNT NUMBER

BANK NAME

FUND PARTICIPANT NAME

ACCOUNT HOLDER

ADDRESS

SIGNATURE (must be signed by account holder)

PHONE NUMBER

EMAIL ADDRESS

DATE

LAST 4 DIGITS SOCIAL SECURITY NO./TAX I.D. NO.

**Must be a U.S. bank account.**

- TIP** Call your financial institution to make sure they will accept direct deposits.
- TIP** Verify your account number and routing transit number with your financial institution.
- TIP** Do not use a deposit slip to verify the routing number.

0444  
90-2293/3222

JODIE MUSICIAN  
123 MAPLE AVE  
LOS ANGELES, CA 91201

PAY TO THE ORDER OF \_\_\_\_\_ \$ \_\_\_\_\_

Finlayson National Bank  
Anyburg Financial Centre 0183  
3742 Walnut Ave.  
Anyburg, CA 95846  
1-800-555-1551  
24 Hour Customer Service

FOR \_\_\_\_\_ MP

⑆ 3 2 2 2 7 1 6 2 7 1 6 7 6 ⑆ 0 0 0 0 0 0 ⑆ 5 0 ⑆ 0 4 4 4

HARLAND 1998

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↓
↓  
 routing number      account number      check sequence number

**By signing and submitting this form, you acknowledge that you have read and agreed to the following Terms and Conditions:**  
 I authorize both AFM & SAG-AFTRA Intellectual Property Rights Distribution Fund ("FUND") and SAG-AFTRA and Industry Sound Recordings Distribution Fund ("SRDF") to utilize my profile information where applicable for distribution purposes. Also, I understand that my information may be shared with any entity that the Fund may administer/distribute for on my behalf, now and in the future, and this authorization will remain in effect until canceled in writing, signed and dated by me.