



STEAMFITTERS LOCAL #353  
 6304 W. Development Drive  
 Peoria, IL 61604  
 (309) 633-1353

**AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENT  
 FOR DUES AND DEATH BENEFIT ASSESSMENTS TO  
 STEAMFITTERS LOCAL #353**

MEMBER NAME: \_\_\_\_\_  
 (PLEASE PRINT)

I hereby authorize Steamfitters Local 353, hereinafter called LOCAL, to initiate debit entries to my checking or savings account indicated below and the financial institution named below, hereinafter called DEPOSITORY, to debit the same to such account.

DEPOSITORY NAME: \_\_\_\_\_

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

TRANSIT/ABA # \_\_\_\_\_ ACCOUNT # \_\_\_\_\_

TYPE OF ACCOUNT (Check one):      Checking \_\_\_\_\_      Savings \_\_\_\_\_

**PAYMENT FOR MONTHLY DUES:**

Member's account will be debited on the fifth business day of each month. Should the fifth of the month fall on a weekend or holiday, the debit will be postponed to the next business day.

**DEATH BENEFIT ASSESSMENT**

Member's account will be debited at least ten (10) days after the assessment has been levied. Notice will be provided by US Mail.

This authority is to remain in full force and effect until LOCAL and DEPOSITORY has received written notification from me of its termination in such time and in such manner as to afford LOCAL and DEPOSITORY a reasonable opportunity to act on it. Termination will automatically occur upon notification of Member's death. Dues payments will cease upon notification of Member's 50-year anniversary with LOCAL

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_