

**FORM C (INTERNATIONAL BANK ACCOUNT)**

**WIRE TRANSFER FORM**

**Please complete this form and return it to the Covenant Pension Trust to have your pension benefit deposited to your checking or savings account.**

**Name** \_\_\_\_\_  
FIRST / MIDDLE / LAST

EMAIL \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_  
STREET  
\_\_\_\_\_  
CITY STATE/PROVINCE ZIP

**I hereby authorize the Covenant Pension Trust to automatically deposit my Covenant Pension benefit to the account listed below on the first business day of each month. I understand fees charged by the Covenant Pension Trust bank to process wire transfers will be incurred by the Covenant Pension Trust, and fees charged by my bank will be incurred by me.**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
MONTH / DAY / YEAR

**Bank and Account Information**

NAME ON THE ACCOUNT \_\_\_\_\_

ADDRESS \_\_\_\_\_  
STREET  
\_\_\_\_\_  
CITY STATE/PROVINCE ZIP

BANK NAME \_\_\_\_\_ TYPE OF ACCOUNT CHECKING SAVINGS

BANK ADDRESS \_\_\_\_\_  
STREET  
\_\_\_\_\_  
CITY STATE/PROVINCE ZIP

PHONE \_\_\_\_\_

Bank SWIFT Code \_\_\_\_\_ Transit/Branch # \_\_\_\_\_

Bank/Institution # \_\_\_\_\_ Bank Account # \_\_\_\_\_

*Please include a letter from your bank with wire instructions when returning this form.*