



**PEABODY  
RETIREMENT BOARD  
CONTRIBUTORY RETIREMENT SYSTEM**



PEABODY CITY HALL  
1882

CITY HALL-24 LOWELL ST.  
PEABODY, MA 01960  
(TEL 978-538-5911-13- FAX 978-538-5989)

**BOARD MEMBERS**

Richard Yagjian, Chairperson  
Patricia Davis-Schaffer  
Richard M. Bettencourt, Sr.  
Joseph P. DiFranco, Sr.  
John J. McGinn

**Date:** \_\_\_\_\_

**This is my request and your authority to deposit my pension check to my account in the:**

\_\_\_\_\_  
**(Name of Bank)**

\_\_\_\_\_  
**(Street) (City) (State) (Zip Code)**

**Checking Account Number** \_\_\_\_\_

**Savings Account Number** \_\_\_\_\_

**Social Security Number** \_\_\_\_\_

**Bank Routing Number** \_\_\_\_\_

**Name:** \_\_\_\_\_  
**(Signature)**

\_\_\_\_\_  
**(Street Address)**

\_\_\_\_\_  
**(City) (State) (Zip Code)**

**Return To:**  
**PEABODY RETIREMENT BOARD**  
**24 LOWELL ST. – CITY HALL**  
**PEABODY, MA 01960**

**\*PLEASE ATTACH A BLANK CHECK WITH THE WORD "VOID" WRITTEN ACROSS IT\***  
**\*VOIDED CHECK MUST HAVE YOUR NAME AND ADDRESS ON IT.**