



Authorized User List for Online RPB Pension Tracking System

Congregation Name, Street Address: _____

City, State, Zip Code: _____

Please have an authorized congregational representative complete the name, email address, and level of authorization for all users in the table below. An “Administrator” is authorized to process all transactions and can make changes to your congregation’s contact information and banking information. A “User” can process all RPB transactions but is not authorized to change your congregation’s contact information or banking information.

Authorized Name	Email Address	Level of Authorization
		<input type="checkbox"/> Administrator <input type="checkbox"/> User
		<input type="checkbox"/> Administrator <input type="checkbox"/> User
		<input type="checkbox"/> Administrator <input type="checkbox"/> User
		<input type="checkbox"/> Administrator <input type="checkbox"/> User
		<input type="checkbox"/> Administrator <input type="checkbox"/> User

An authorized congregational representative must provide his/her name, title, signature and date in the fields below. We can’t accept the form without the approval of an authorized congregational representative.

Authorized Congregational Representative:

Print Name/Title

Sign Name

Date

Please return this completed form to the Reform Pension Board via email, fax or postal mail:

Reform Pension Board; 355 Lexington Avenue, 18th Floor, New York, NY 10017; Tel: 212-681-1818; Fax: 212-681-9340; Email: PensionBoard@rpb.org