

ACH VOID CHECK APPROVAL FORM

Please attach voided check here.

This form is required to establish TeleTransfer/ACH (in addition to a Brokerage Investor Services form) so that BNY Brokerage Account may obtain authorization of registrant(s) listed on your checking account that are not listed on your brokerage account.

Please use this form as my authorization for:

_____ to use the attached
(brokerage account registrant(s))

voided check from checking account number: _____

registered in the name of _____
(registrants of bank account)

to establish TeleTransfer/ACH on his/her brokerage account number:

_____.

Sincerely,

(Signature of bank account registrant
not listed on brokerage account)

Date

Please mail this completed form to:
BNY BROKERAGE SERVICES
PO Box 9008
Hicksville, NY 11802-9008

For Registered, Certified or Overnight Mail, please mail to:
BNY BROKERAGE SERVICES
144 Glenn Curtiss Boulevard, 106-9501
Uniondale, NY 11556-0144