

## DIRECT DEPOSIT REQUEST ACH INTEREST PAYMENTS TO FINANCIAL INSTITUTION

Important: To ensure the accuracy of your request please attach a voided check.

I (we) understand that in furnishing the information below and by signing this form BNY Mellon is authorized to deposit interest payments by electronic funds transfer directly to the account and financial institution specified below. BNY Mellon is also authorized to initiate corrections, if necessary, to any amounts credited in error.

I (we) understand also that BNY Mellon may terminate its electronic funds transfer services at any time and for any reason and further, that BNY Mellon may at its discretion, make Interest Payments by check, mailed to the address shown or such address as I (we) may specify from time to time. This authorization will remain in effect until BNY Mellon receives written revocation from me (us) in sufficient time to enable BNY Mellon to act on that revocation or until BNY Mellon discontinues this service.

Registration	
CUSIP Number	Bond Number (s)
CUSIP Number	Bond Number (s)
CUSIP Number	Bond Number (s)
Taxpayer Identification number	
Name of Financial Institution:	
<u>Circle One</u> : Savings Account	Checking Account
Routing and Transit Number*	

Account Number

\*The Routing and Transit Numbers are the first 9 numbers appearing on the left hand side of the check.

Enclose a voided check if your payment is going to a checking account or a deposit slip if your payment is going into a savings account to the address indicated below. Please check your deposit slip and verify if it can be used for automatic payments.

In order for your ACH interest payment to begin with the next interest payment, we must receive the information above at least 30 days prior to the payment date. For example, if the interest payment date is July  $1^{st}$ , authorization must be received by June  $1^{st}$ .

## BNY Mellon, Agent AUTHORIZATION FORM

I (we) authorize BNY Mellon to send interest payments directly to the account and financial institution per my (our) instructions. All of the terms and conditions listed above have been reviewed, understood, and accepted. All owners on the account have signed below.

 Date
 Date
 Date

PO Box 396, ATTN: COA Unit, East Syracuse, NY 13057