



# ACH Setup Instructions

Questions? Call 1-800-731-6830

**Instructions:** Complete this form only if you would like the Illinois Trust Client Services Group to **add or remove** ACH instructions for your Entity. Submit this form through Connect, or fax or mail this form to the fax number or address at the bottom of the page.

**Note:** This form is only for ACH instructions. ACH payments are financial transactions handled through the Automated Clearing House (ACH). ACH payments are not the same as wire transfers and are not same-day transactions. Your new ACH instruction may take the Illinois Trust Client Services Group up to 24 hours to verify and set up on your Account. Please take this into consideration when requesting a transaction. The ACH instructions and authorized signature below permit Illinois Trust, per your direction, to move money to the institution designated below from IPDLAF+ Class or from the institution designated below to IPDLAF+ Class. **If the bank Account listed below has ACH filters, please contact your bank to authorize Illinois Trust to process ACH transactions against your bank Account.**

**INVESTOR INFORMATION:** (Please enter your Entity's name and Tax Identification Number.)

**Investor Name:** \_\_\_\_\_  
(Name that appears on Trust records)

**TIN:** \_\_\_\_\_  
(Taxpayer Identification Number)

**INSTRUCTION DETAIL:** (Please select an action type and complete the detail instructions below.) (\* = Required fields)

**ACTION TYPE:**

Add Remove

**BANKING INFORMATION:**

\*Bank Name: \_\_\_\_\_ \*Bank Account #: \_\_\_\_\_  
\*ACH ABA or Routing #: \_\_\_\_\_ \*Legal Account Owner: \_\_\_\_\_  
Addenda Information: \_\_\_\_\_ Nickname: \_\_\_\_\_  
(Unique name to identify this instruction)  
\*Bank Account Type:    Checking    Savings

**Please add/remove the above instructions to/from the Account(s) listed below:** (Please list the specific IPDLAF+ Class Account(s) below.)

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_
- 8. \_\_\_\_\_
- 9. \_\_\_\_\_
- 10. \_\_\_\_\_

**TRANSACTION REQUEST:** (Complete this section to initiate a transaction using the new instructions above. Transactions may take 24 hours to process.)

IPDLAF+ Class Account \_\_\_\_\_ Transaction Date: \_\_\_\_\_  
Transaction \$ Amount: \_\_\_\_\_ Transaction Type:    Purchase (Move funds to the Trust Account listed.)  
Redemption (Move funds from the Trust Account listed.)

**SIGNATURE:** (Please have a Contact per Trust records who is authorized to update banking instructions sign below.)

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_ Phone # \_\_\_\_\_  
Print or Type Name of Authorized Signatory \_\_\_\_\_ Title/Position \_\_\_\_\_ Email Address \_\_\_\_\_

**Any document containing sensitive information received by email will not be accepted. Please send by uploading through Connect, fax, or mail.**

<b>SEND VIA CONNECT:</b> Log in to Account Access <i>Existing Connect</i> Click <input checked="" type="checkbox"/> Secure Contact <i>Users Only</i> Select file to upload - Send message	<b>FAX TO:</b> Illinois Trust Client Services Group 1-888-535-0120	<b>MAIL TO:</b> Illinois Trust Client Services Group P.O. Box 11760 Harrisburg, PA 17108
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