



Name On Account: \_\_\_\_\_

Account Number: \_\_\_\_\_

**AUTHORIZATION FOR ACH TRANSFER  
(AUTOMATED CLEARING HOUSE)**

To: Penson Financial Services, Inc.  
Attn: Banking Department  
1700 Pacific Avenue  
Suite 1400  
Dallas, Texas 75201

\_\_\_\_\_ New ACH Authorization

\_\_\_\_\_ Change of Existing Authorization

**I/We authorize Penson Financial Services, Inc. ("Penson") to transfer funds via ACH between my securities account and my bank account as follows:** (In the event an entry is incorrect, Penson reserves the right to make correcting entries.)

**Receiving Bank Account is a:**

\_\_\_\_\_ Checking (attach voided check)

\_\_\_\_\_ Savings (attached savings deposit slip)

**Bank Account Information:**

Bank Account Name: \_\_\_\_\_

Bank Account Number: \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_

**Type of Transfer:**

\_\_\_\_\_ On Demand

\_\_\_\_\_ Dividends & Interest Only

\_\_\_\_\_ Recurring (specify below)

Amount: \$\_\_\_\_\_ (must be the same amt. each time)

Frequency: \_\_\_\_\_  
(Daily/weekly/monthly/quarterly/annually)

Start date: \_\_\_\_\_  
(MM/DD/YYYY)

End date: \_\_\_\_\_  
(If until further notice please leave blank)

Attached is a voided check or a deposit slip (for savings accounts ONLY) that will provide the necessary bank routing information. I understand that if my payment order or funds transfer is sent or received through an ACH system I am subject to all applicable rules of such clearing house and any applicable rules set forth in Federal Reserve Operating circulars. I understand that any ACH I receive through ACH is provisional. If final payment is not received by the beneficiary bank for a payment order transferred through ACH, the beneficiary bank is entitled to recover from the beneficiary any provisional credit given and Penson may charge the customer's account for the amounts so credited.

I understand that the ACH activation may take 3 business days from the date of receipt of these instructions. I understand that recurring transfers, if applicable, will occur no later than the next business day, assuming funds availability.

I understand that funds must be readily available in my securities account or there is a possibility the ACH will be delayed or bounced. Additionally, Penson may or may not notify me of returned or rejected ACH transfers.

I agree to hold Penson and their agents free of liability for their compliance with these instructions. This authorization shall remain in full force and effect until instructions to terminate or alter are received in writing by Penson Financial Services, Inc.

\_\_\_\_\_  
Account Owner Signature Dated

\_\_\_\_\_  
Joint Owner Signature Dated

**Attach voided check or deposit slip here**