TradeUP Securities

ELECTRONIC FUNDS TRANSFER (ACH) FORM

Please complete the following fields to begin the electronic transfer of funds between your brokerage account and your bank account. All transactions are processed through the Automated Clearing House (ACH) system.

1. ACCOUNT INFORMATION

ACCOUNT TITLE: _____

ACCOUNT NUMBER: _____ SOCIAL SECURITY NUMBER: _____

2. BANK ACCOUNT INFORMATION

ABA NUMBER _____ BANK ACCOUNT NUMBER _____

BANK NAME _____ CITY _____ STATE _____ ZIP _____

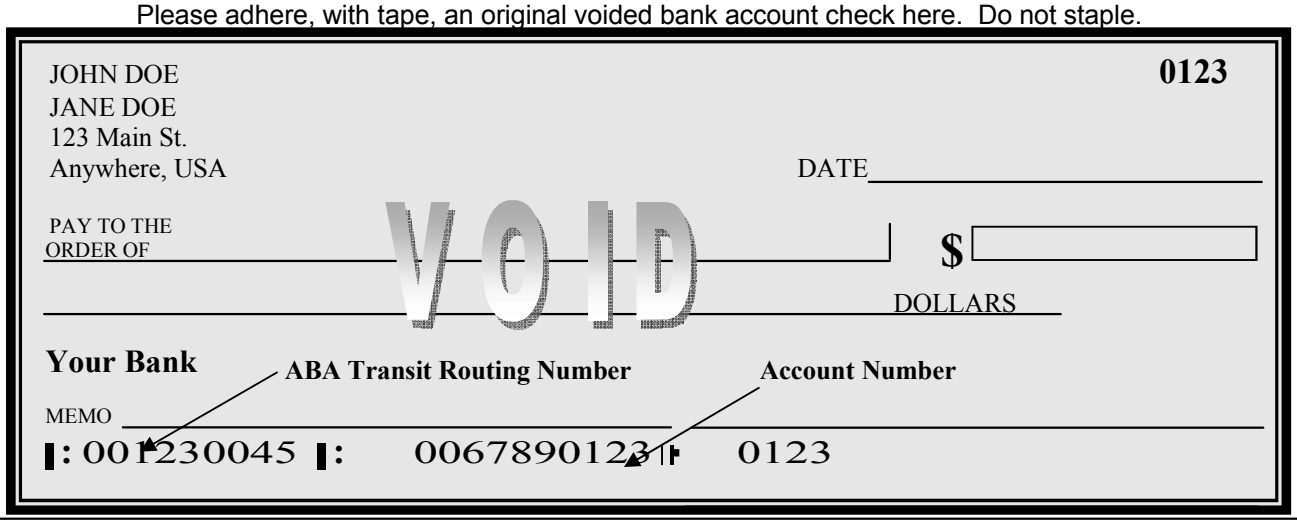
ACCOUNT TYPE: ☐ CHECKING ☐ SAVINGS

I/We hereby authorize TradeUP Securities to initiate credit/debit entries to the bank account indicated above and further authorize my (our) Bank to debit the same to such account. This authority is to remain in full force and effect until TradeUP Securities has received written notification from me (or either of us) of its termination in such time and in such manner as to afford TradeUP Securities and our Bank a reasonable opportunity to act on it.

PRIMARY ACCOUNT OWNER	JOINT ACCOUNT OWNER (if applicable)
NAME: _____	NAME: _____
SIGNATURE: _____	SIGNATURE: _____
DATE: _____	DATE: _____

3.

Please adhere, with tape, an original voided bank account check here. Do not staple.



1 For corporate accounts, a corporate resolution displaying the corporate stamp, and a letter from the corporation authorizing the specific transactions for which you are permitted to debit and credit the bank account, must accompany this authorization.
2 For savings accounts, either a bank encoded deposit slip, a copy of the bank statement, or a letter from the bank signature guaranteed by an officer confirming the bank information must accompany this authorization.

For processing by financial organization

ACH TYPE:
☐ Periodic deposits to brokerage account ☐ Periodic distributions to bank account ☐ Income distributions to bank account

FREQUENCY:
☐ Monthly ☐ Quarterly ☐ Semi-Annually ☐ Annually

CONTRIBUTION AMOUNT FOR DEPOSITS AND DISTRIBUTIONS: (Whole Dollar Amounts - Leave Blank for Income Distributions)

AMOUNT: _____ START DATE: _____

4. MAIL TO:

TRADEUP SECURITIES INC., 101 Eisenhower Parkway, Roseland, NJ 07068, www.marsco.com,1-800-9MARSCO