

Request Type: Add New Bank Information (Complete Only Sections A, B, D)

Delete Existing Bank Information (Complete Sections A, C, D)

I hereby certify that I am authorized by the Corporation, Partnership, Entity, or Trust listed below, and am empowered to change bank account information for the ISJIT account(s) as stated. *

The fund is not responsible for ACH/wire transaction failure caused by inaccurate or incomplete information.

SECTION A: FUND ACCOUNT INFORMATION

1. Name of Corporation, Partnership, Entity or Trust: _____

2. ISJIT Sub Account Number:

All Accounts (provide one account number for verification: _____)

Only the Following Account Number(s): _____

SECTION B: ADD NEW BANK INFORMATION

3. New Instructions for: ACH Wire Both ACH & Wire (*Confirm ABA# is the same*)

4. Local Depository Name: _____

5. Local Depository Address: _____

6. ABA/Routing Number: _____

7. Depository Account Number: _____

8. For Further Credit Info: _____ (*available on wires only*)

9. Account Type: Checking (must attach voided check) Savings (*must confirm ABA# with bank*)

SECTION C: DELETE EXISTING BANK INFORMATION

10. Deleting Instructions for: ACH Wire Both ACH & Wire.

11. Local Depository Name: _____

12. Local Depository Address: _____

13. ABA/Routing Number: _____

14. Depository Account Number: _____

15. For Further Credit Info: _____ (*available on wires only*)

SECTION D: AUTHORIZATION *** TWO Authorized Signatures Required ***

I authorize ISJIT to change bank account information as stated:

Signature

Print Name

Date

Title

Phone Number

I authorize ISJIT to change bank account information as stated:

Signature

Print Name

Date

Title

Phone Number

Completed forms may be submitted to ISJIT via fax, email or regular U.S. mail.
Fax to 866-548-8633, Attn: ISJIT | Scan and Email to: isjit@pmanetwork.com
Mail to: ISJIT Administration, PMA Financial Network, Inc., 2135 CityGate Lane 7th FL, Naperville IL 60563