

BANK ACCOUNT INFORMATION

Domestic Wire Instructions (Add/Change/Delete)

The Entity authorizes the Fund to initiate wire credits to the bank account indicated below. The Entity acknowledges that the origination of wire transactions must comply with the provisions of U.S. law. This authorization is to remain in full force and effect until the Fund receives written notification from the Entity of its termination at least 10 business days prior to the next scheduled payment. **The Fund, the Administrator and PMA are not responsible for wire transaction failure caused by inaccurate or incomplete information, or for any losses, damages, liabilities, costs or expenses arising out of these Instructions if properly followed.**

Section A: Fund Account Information

Client Name: _____

Fund Account Master: _____

All Sub-Accounts: _____

Limited to Sub-Account(s): _____

Section B: Bank Account Information (Wire Instructions)

Add Change Existing Wire ID #s _____ Delete Existing Wire ID #s _____

Beneficiary Bank Name: _____

ABA Routing Number (9 digits): _____

Beneficiary Account Number: _____

Beneficiary Account Name: _____

For Further Credit Information (if applicable): _____

Intermediary Bank Information (if applicable):

Intermediary Bank Name: _____

ABA Routing Number (9 digits): _____

Intermediary Account Number: _____

Intermediary Account Name (35 characters max): _____

Section C: Authorization

This section must be signed by an authorized person as designated in the Master Account Application or the Primary Contact, or the Authorized Personnel Information forms. By signing this form, you hereby acknowledge that the appropriate due diligence has been performed to verify the validity of these instructions.

Signature: _____ Date: _____

Printed Name: _____ Phone: _____

Title: _____ Email: _____