# Cash Management Select Access Features Instructions

## Use this form to:

- Add or remove ACH, checkwriting, and/or debit card features within your existing Brokerage account.
- Convert an existing Premier Access cash management account to a Select Access cash management account.

# Helpful to Know

- If you do not already have a brokerage account, you must also include a completed Brokerage Account Application.
- If you are adding checkwriting, your checks will arrive in approximately 5 to 10 business days.

### **Cash Management Features**

- Unlimited ACH (direct debit and deposit) and access to Bill Pay will be included with your cash management features.
- Optional ability to add checkwriting.
- Visa Classic Debit Card issued from BNY Mellon with access to over 600,000 Visa ATMs in the United States and 133 countries around the world.
- Margin borrowing privileges, subject to approval and minimum equity and maintenance requirements, as described in the Customer Agreement; note that you will automatically be considered for margin UNLESS you indicate otherwise in Section 3.

Checkwriting and debit cards are provided by BNY Mellon Investment Servicing Trust Company.

#### 1. Account Owner Information

Provide the account owner information.

#### 2. Add or Remove Features on your Account

Complete this section to add or remove checkwriting and debit cards. If you are adding checkwriting, be sure to complete the signature card.

**Note**: If this is a custodial UGMA/UTMA account, only the Custodian can have checkwriting or debit card authority. For Trust and other entity accounts, only authorized individuals can have checkwriting or debit card authority.

# 3. Margin Privileges

Check the box in this section only if you do NOT want margin. Otherwise, you will automatically be considered for margin privileges.

The Signed Disclosure of Credit Terms, which is attached to this form, is required to be submitted with this form.

**Note:** If you already have margin on this account, you cannot remove margin using this form. Please refer to the Margin Account Agreement details on how to terminate margin privileges.

### 4. Signatures and Dates

Only one authorized person is required to sign and date this form.

### **Checkwriting Signature Card**

All authorized individuals planning to use checkwriting must sign the signature card.



# **Cash Management Select Access Features**

The attached Instructions and Customer Agreement (the "Agreement") describe the terms and conditions that govern this Brokerage account ("Account"). Type on screen or fill in using CAPITAL letters and black ink. If you need more room for information or signatures, use a copy of the relevant page.

# 1. Account Owner Information

Enter full name as evidenced by a government-issued, unexpired document (e.g., driver's license, passport, permanent resident card).

Entity Name		
First Name	Middle Name	Last Name
First Name	Middle Name	Last Name
First Name	Middle Name	Last Name
First Name	Middle Name	Last Name
First Name	Middle Name	Last Name
First Name	Middle Name	Last Name

# Acknowledgements

Account O

Account O

Account O

Account O

Account O

Account O

Check the box and provide information if you or your spouse, or any of your relatives (including parents, in-laws and/or dependents, etc.), living in your home (at the same address), is a member of the board of directors, is a 10% shareholder, or is a policy-making officer or can direct corporate management of policies of a publicly traded company.

Company Name	CUSIP or Symbol
Company Name	CUSIP or Symbol
Company Name	CUSIP or Symbol
Company Name	CUSIP or Symbol
Company Name	CUSIP or Symbol
Company Name	CUSIP or Symbol
	Company Name Company Name Company Name Company Name

# 2. Add or Remove Features on your Account

Complete this section to add or remove checkwriting and debit cards. If you are adding checkwriting, be sure to complete the signature card.

Note: If no feature is selected in this section, ACH will be added as the default.

# ACH

Add ACH Submitting this form automatically adds ACH capabilities and access to Bill Pay.

### Checkwriting

Add Checkwriting Indicate information to print on checks. If none is selected, default will be name and address.

Print Checks with Name(s) Only

Print Checks with Name(s) and Mailing Address

# OR

Check one. ►

Remove Checkwriting Outstanding checks may continue to be honored for a limited time after the checking feature has been canceled, as stated in the checking terms & conditions. All check books should be destroyed and a stop payment should be placed on any checks you do not wish to be cashed. If you would like to add the checkwriting feature and there has been 12 months or more time since the feature was removed, new paperwork will be required to re-establish the feature.

**Note:** This election will not cancel ACH.

# Visa Classic Debit Card

Debit Cards can only support 26 characters for the embossing of names.

## Add Visa Classic Debit Card

- Check one. ► Issue Card(s) to:
  - One Account Owner

Account Owner Name

# Each Account Owner

Entity Account (Corporate, Trust, Partnership, etc.)

Entity accounts must provide a cardholder's name to be printed on the card. **Note**: Cards can be printed with up to, but no more than, 26 characters, depending on characters used.

Check this box to include double line embossing of the entity name and cardholder name.

Individual Cardholder Name

Individual Cardholder Name

Individual Cardholder Name

### Remove Visa Classic Debit Card

**Remove Features or Change Your Account** 

#### └ Change your account from Premier to Select Access

**Note**: This will close the debit card feature. A new debit card can be ordered by "adding" the feature on this form. This election will also change the treatment of proceeds that may have previously been mailed to you or swept to a bank account.

## Remove all cash management features from the account

Note: This election will cancel ACH, checkwriting, and all debit cards.

You will automatically be considered for margin privileges UNLESS you check the box below.

I DO NOT WANT to be considered for margin privileges.

# 4. Signatures and Dates Form cannot be processed without signatures and dates.

**Customer Identification Program Notice:** To help the government fight financial crimes, Federal regulation requires your Broker/Dealer and us to obtain your name, date of birth, address, and a government-issued ID number before opening your account, and to verify the information. In certain circumstances, we may obtain and verify comparable information for any person authorized to make transactions in an account. Also, Federal regulation requires us to obtain and verify the beneficial owners and control persons of legal entity customers. Requiring the disclosure of key individuals who own or control a legal entity helps law enforcement investigate and prosecute crimes. Your account may be restricted or closed if we or your Broker/Dealer cannot obtain and verify this information. We or your Broker/Dealer will not be responsible for any losses or damages (including, but not limited to, lost opportunities) that may result if your account is restricted or closed.

In the section below, "NFS," "us," and "we" refer to National Financial Services LLC and its officers, directors, employees, agents, affiliates, shareholders, successors, assigns, and representatives as the context may require; "you" refers to the account holder(s) indicated on the account form and any authorized individuals; "Broker/Dealer" refers to the financial institution with which you opened your account.

By signing below, you:

- Affirm that you are at least 18 years of age and are of full legal age in the state in which you reside.
- Affirm that you have received, read, understand, and agree to the current terms of the Cash Management Features Customer Agreement and the account features you selected and agree to future amendments to these terms.
- Understand that unless you provide written notice to the contrary, NFS and your Broker/ Dealer may supply your name and other

information (including your Social Security/ tax identification number) to issuers of securities held in your account so you can receive important information regarding such securities.

- Certify that all information provided on this form is true, accurate, and complete.
- Represent and warrant that you have disclosed to your Broker/Dealer your employer information and affiliation status.
- Have indicated on the signature card the account holder(s) to whom checks should

be issued (names will appear as they appear on the account registration). Checks will be mailed to the account holder's legal address.

 Acknowledge and agree that your Broker/ Dealer may be authorized to provide service instructions for your Debit Card on your behalf, including, but not limited to, establishing travel alerts, reporting your card as lost or stolen and initiating a lock or unlock request and that NFS is not obligated, nor will NFS undertake steps to confirm such service instructions with you.

All Account Owners must sign and date on next page.

# 4. Signatures and Dates continued

The required signature(s) and date(s) appear below and must be accompanied by all pages of this form and the completed signature card. NOTE: If you did not check the box in Section 3, the signed Disclosure of Credit Terms must also be included.

You acknowledge that this account is governed by a pre-dispute arbitration clause, which appears on the last page of this	BY SIGNING THIS APPLICATION YOU ACKNOWLEDGE THAT YOUR SECURITIES MAY BE LOANED TO NES OR OTHERS AND
agreement, and that you have read the pre-dispute arbitration clause.	THAT YOU HAVE READ AND RETAINED A COPY OF THE MARGIN DISCLOSURE STATEMENT AND MARGIN AGREEMENT.

Only one account holder/authorized individual must print name, sign and date this page, and any other supporting documents.

Print Account Owner Name First, M.I., Last		Print Account Owner Name First, M.I., Last	
Account Owner Signature	Date MM - DD - YYYY	Account Owner Signature	Date MM - DD - YYYY
SIGN		SIGN	
Print Account Owner Name First, M.I., Last		Print Account Owner Name First, M.I., Last	
· · · · · · · · · · · · · · · · · · ·			
Account Owner Signature	Date MM - DD - YYYY	Account Owner Signature	Date MM - DD - YYYY
SIGN		SIGN	
Print Account Owner Name First, M.I., Last		Print Account Owner Name First, M.I., Last	
This recount owner runne Frist, M.A., Löst		Third lecourt owner Hume Thist, Will, East	
Account Owner Signature	Date MM - DD - YYYY	Account Owner Signature	Date MM - DD - YYYY
SIGN		SIGN	

For Branch Use Only Account accepted in accordance with firm policies.		
Print Registered Rep. Name	Registered Rep. Signature	Date MM - DD - YYYY
Print Office Manager/Principal Name	Office Manager/Principal Signature	Date MM - DD - YYYY

National Financial Services LLC, Member NYSE, SIPC

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# Checkwriting Signature Card (This section is only required if you are adding checkwriting to your account.)

#### All account holders or authorized individuals planning to use checkwriting must print name, sign and date this page.

#### Establishing Checkwriting

Sign the card using the exact same form of your name as appears on the account registration. Indicate how many signatures will be required to make a check valid, and what information you want printed on the check.

Also use the appropriate instructions below:

- Individual and Joint Accounts: Provide the signature of each owner who is requesting checkwriting privileges.
- Custodial Accounts: Provide the signature of the Custodian only; no minor or third party can have checkwriting authority on these accounts.
- All Other Accounts, Including Trust and Corporate: Each signer must be listed as an authorized individual on the account

registration and also on any additional documentation. Additional documentation, such as a Trust Certification of Investment Powers or Corporate Resolution, may be required.

#### Providing an Updated Signature; No Change in Owner(s)

If you are upgrading, downgrading, or requesting a different type of debit card, follow the instructions above for Establishing Checkwriting or a Debit Card.

#### Making Changes to Checkwriting

Use the appropriate instructions below to add or change the individuals who are authorized to have checkwriting.

• Individual and Joint Accounts: Do not use this card. Instead, complete a Brokerage Account Checkwriting Delegation form (1.784202) to delegate checkwriting authority to a third party.

#### By signing below, you:

- Request that checkwriting be added to your account, appointing BNY Mellon as the agent to provide checkwriting service.
- Agree to the costs, conditions, and terms of usage of checkwriting, as described in the applicable customer agreement(s) governing your account.
- Authorize the withdrawal of money from your account to pay all checks and/or debit card transactions, and all fees associated with these transactions (such as ATM fees, check reorders, returned checks, stop payment requests).
- Agree to notify BNY Mellon immediately if any checks are lost or stolen.
- Guarantee the authenticity of any signature on the card.

#### Signature Card Name(s) and Address on Account

#### Purpose of Card

- Establish checkwriting for the first time
- Update authorized users/signatures on an existing account NOT for individual or joint accounts – for these accounts, see instructions above.

# Number of Signatures Required on Each Check

- Checks will be valid with only one signature Default if no choice is indicated.
- Checks will require two signatures

#### Checkwriting Signature(s)

Print Account Owner Name First, M.I., Last		Print Account Owner Name First, M.I., Last	
Account Owner Signature	Date MM - DD - YYYY	Account Owner Signature	Date MM - DD - YYYY
Print Account Owner Name First, M.I., Last		Print Account Owner Name First, M.I., Last	
Account Owner Signature	Date MM - DD - YYYY	Account Owner Signature	Date MM - DD - YYYY
Print Account Owner Name First, M.I., Last		Print Account Owner Name First, M.I., Last	
Account Owner Signature	Date MM - DD - YYYY	Account Owner Signature	Date MM - DD - YYYY

For Branch Use Only	
Brokerage Account Number	Checking Account Number

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