



## ACH Withdrawal Form

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Today's Date: \_\_\_\_\_

Transaction #: \_\_\_\_\_  
*(for Cutwater use)*

Transaction Date: \_\_\_\_\_

**Fax this form to Cutwater Asset Management (1-800-765-7600) on the Date Initiated**

Use this form to notify Cutwater Asset Management of Withdrawal before 11:00 A.M. for transfer via the ACH system. Funds are available the business day following the date initiated.

Name of Public Entity \_\_\_\_\_

Name of Banking Institution \_\_\_\_\_

Bank Account # \_\_\_\_\_

Amount of Withdrawal \$ \_\_\_\_\_

\_\_\_\_\_ DOLLARS

Name of PDIP Account \_\_\_\_\_

PDIP Account # NH-01- \_\_\_\_\_

Authorized Signatory \_\_\_\_\_

**For Cutwater Use:**

Verification of Funds Availability \_\_\_\_\_

**For Cutwater Use:**

Cutwater Confirmation Signature \_\_\_\_\_