



Depository Bank/Authorized Wire and ACH Accounts Amendment

Effective Date _____

Name of Public Entity _____

PDIP Account # NH-01- _____

Please **DELETE** the following Bank for the above named public entity:

Bank Name: _____

Bank Account Number(s): _____

Please **ADD** the following Bank for the above named public entity:

Bank Name: _____

ABA Number: _____

Wire: _____

ACH: _____

(if different)

Bank Account Number(s): _____ **Special Bank Wire Instructions:** (If applicable.)

What Transfer Capabilities Would You Like on this Account? (Please check one.)

Wire Only ACH Only Wire and ACH

If ACH Requested, are accounts Checking or Savings? (Please check one.)

Checking Savings

Bank Contact Person _____ Telephone Number _____ Extension _____

Changes Authorized By: (Current Authorized Signer)

Signature _____ Title _____ Date _____