

Toll Free: 800-962-4238 PacificPremierTrust.com

ACH Debit Authorization

PACIFIC PREMIER TRUST'S DIRECT PAYMENT PLAN

Use this form to authorize Pacific Premier Trust to debit your firm's checking or savings account in order to make payments to one or multiple Pacific Premier Trust accounts. The authority you give Pacific Premier Trust to charge your account will remain in effect until you notify us in writing to terminate this authorization. On the first page, fill in the information regarding your account. On the second page, fill in information about the third party. **NOTE:** An authorized signer on your bank account must sign page 2.

1. INVESTMENT INFORMATION

INVESTMENT NAME (I.E. NAME OF ASSET. IF LLC, LP OR C-CORP, SEE REAL PROPERTY OR NOTES CHECKLISTS)

PACIFIC PREMIER TRUST ASSET ID (IF KNOWN)

ACCOUNTS & AMOUNTS

If listing more than eight accounts, please attach a corresponding spreadsheet. Attach amortization schedule, if applicable.

1	PACIFIC PREMIER TRUST ACCOUNT OWNER NAME	PACIFIC PREMIER TRUST ACCOUNT NO.	AMOUNT \$	PURPOSE OF PAYMENT ¹
			<u>_</u>	
2			\$	
3				
	1	1	\$	
4			\$	
5			\$	
6				
0			\$	
7				
			\$	

1e.g. "Dividend," "Principle," "Interest," "Rental Income," etc.

DEBIT DETAILS

Please ensure that sufficient funds are available on the desired debit date, which **CANNOT BE** the 29th, 30th or 31st of the month. Your Financial Institution may not process the transaction if sufficient funds are not available and Pacific Premier Trust will not request the funds again until the following debit date. Cancellation of recurring debits must be submitted in writing. Modification of an existing recurring debit must be updated using this form.

Frequency:] Monthl	y 🗌 Quarterly	□ Annually □ 0	ne-Time:	MM	DD	YYYY	
Date of month to debit your account:								
Date to begin debit:	MM	DD	ΥΥΥΥ		date oplicable):	M	DD	YYYY



2. AUTHORIZING PARTY INFORMATION

FIRM NAME	
CONTACT NAME	CONTACT PHONE NO.

3. ACH AUTHORIZATION

I, _________ (bank account holder) authorize Pacific Premier Trust to initiate electronic debit entries to checking account (or) savings account held in the name of _________ (bank account holder) for payments related to investments held within one or more Pacific Premier Trust accounts. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. This authority will remain in effect until I have canceled it in writing.

4. WHERE TO DEBIT ACH PAYMENTS

I want to:

FINANCIAL INSTITUTION	CONTACT PHONE NO.
ACCOUNT NO.	ABA/ROUTING NO. (9 DIGITS)

5. TERMS & CONDITIONS

Please ensure that your bank account is enabled to accept our incoming ACH debit. If you employ ACH blocks or filters, your account information must be modified to accept Pacific Premier Trust originated entries. Pacific Premier Trust will employ a system of generating prenotification entries prior to initiating live transactions to your bank account. Your bank can use the information that they receive in the prenotification to insure that your account is correctly modified to accept live transactions.

I authorize Pacific Premier Trust to (1) initiate debit entries to my account indicated above, and (2) to initiate reversals to my Financial Institution account of erroneous or duplicate entries and to credit such account as appropriate. This authorization will remain in full force and effect until Pacific Premier Trust receives written notification from me of the service's termination. Pacific Premier Trust must receive any such notification in a time and manner so as to give Pacific Premier Trust and my Financial Institution a reasonable opportunity to act on it.

I agree to release, indemnify, defend and hold Pacific Premier Trust and its related entities harmless for any claims arising out of this/these payment(s). This includes, but is not limited to, claims that this/these payment(s) is/are not prudent, proper, legal or diversified. I also understand and agree Pacific Premier Trust and its related entities will not be responsible to take action should the investment noted herein become subject to default, including fraud, insolvency, bankruptcy, or other court order or legal process. These instructions are further subject to all terms and conditions of the Account Owner's Custodial Agreement within Pacific Premier Trust and all applicable State and Federal laws.

BANK ACCOUNT OWNER SIGNATURE	DATE

Pacific Premier Trust performs the duties of an independent custodian of assets for self-directed individual and business retirement accounts and does not provide investment advice, sell investments or offer any tax or legal advice. Clients or potential clients are advised to perform their own due diligence in choosing any investment opportunity as well as selecting any professional to assist them with an investment opportunity.

NON-DEPOSIT INVESTMENT PRODUCTS ARE NOT INSURED BY THE FDIC; ARE NOT DEPOSITS OR OTHER OBLIGATIONS OF, OR GUARANTEED BY, THE BANK OR ANY OF ITS DIVISIONS; AND ARE SUBJECT TO INVESTMENT RISKS, INCLUDING POSSIBLE LOSS OF THE PRINCIPAL AMOUNT INVESTED.

Upload forms to: PacificPremierTrust.com/upload

Fax to: 303-614-7031

Send mail to: Pacific Premier Trust Processing Center P.O. BOX 981012 Boston, MA 02298

For express deliveries: FIS-Remittance Processing Loading Dock #2 Attn: Pacific Premier Trust 10 Dan Road Canton, MA 02021

Questions? Call 800-962-4238



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