242 State House
200 West Washington Street
Indianapolis, Indiana 46204

888-860-6242
800-765-7600 fax
www.trustindiana.in.gov

Automated Clearing House (ACH) Investment Form

(For sending funds to TrustINdiana)

Fax this form to TrustINdiana (1-800-765-7600) by 12:00pm Eastern Time on the Date Initiated.

Use this form to notify TrustINdiana of Investment request before 12:00pm Eastern Time for transfer via the ACH system. Funds are credited the business day following the date initiated.

Today's Date: ____/____/____

Transaction #: _____
(for TrustINdiana use)

Transaction Date: ____/____/____

Name of Public Entity: _____

Name of Banking Institution: _____

Bank Account #: _____

Amount of Investment: $ _____

_____ DOLLARS

Name of TrustINdiana Account : _____

TrustINdiana Account #: _____

Authorized Signatory: X _____
(Sign here)

If you need assistance completing this form, please call TrustINdiana Client Services at 1-800-395-5505.