



PO Box 3288  
Omaha, NE 68103-0288

ACCOUNT NUMBER \_\_\_\_\_

# ACH Addendum to The Account Application

You Must Check One of the Following: New Instructions  Change of Existing Instructions

I authorize TD AMERITRADE Clearing, Inc. to debit my account referenced below for the purpose of settling any securities trades and/or purchases of merchandise and/or services I make through \_\_\_\_\_.

I understand that such debits will vary in time and amounts according to the trades and/or purchases I make, and I hereby waive any written notification which may otherwise be due. If I have indicated a change of instructions, I understand that the new instructions herein given will replace and supercede my prior given instructions described below.

Institution Name		
Institution Address		
City	State	ZIP
Institution Phone Number	Institution Account Number <i>(Important: Please contact your institution for this number.)</i>	
Routing/ABA Number <i>(Important: Please contact your institution for this number.)</i>		Please check one: Savings <input type="checkbox"/> Checking <input type="checkbox"/>
Name(s) on Institution Account		

### If this is a change of previously given instructions, you must indicate by completing the following information for the previously given instructions:

Previous Institution Name		
Previous Institution Address		
City	State	ZIP
Previous Institution Phone Number	Previous Institution Account Number	
Routing/ABA Number		Please check one: Savings <input type="checkbox"/> Checking <input type="checkbox"/>
Name(s) on Institution Account		

In consideration of your accepting one or more accounts and in consideration of accepting these instructions, I hereby acknowledge that I have read; and understand and agree to the terms set forth in the Account Application, including terms relating to pre-dispute arbitration. I agree to indemnify and hold harmless TD AMERITRADE Clearing, Inc. for any loss, damage or claim arising from these instructions. This authority is to remain in full force and effect until TD AMERITRADE Clearing, Inc. has received written notification from me (or either of us) of its termination or change in such time and in such manner as to afford TD AMERITRADE Clearing, Inc., and the above named institution, a reasonable time to act upon it.

<input checked="" type="checkbox"/> Account Owner's Signature	Date
<input checked="" type="checkbox"/> Account Co-Owner's Signature	Date

**Note:** Please attach copy of a voided check for our Pre-notification use. Thank you.

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