



## Automated Clearing House (ACH) Authorization

Please have the quarterly distributions from my (our) investment in Cypress Fund(s) \_\_\_\_\_ deposited directly into my checking or savings account at the following financial institution:

1. Investor's Name as it appears on the Cypress Account: \_\_\_\_\_  
**This should be the same as it appears on the registration of the investment. Please print legibly.**

2. Account number:

\_\_\_\_\_ OR \_\_\_\_\_  
Checking Account Savings Account

3. Transit/ABA Routing Number. (9 characters) *Please verify this with your financial institution*

\_\_\_\_\_

4. Bank or financial institution information:

\_\_\_\_\_  
Name Address

\_\_\_\_\_  
City/State/Zip Phone Number

\_\_\_\_\_  
Shareholder Signature/Date Joint Shareholder Signature/Date

Please send this form to:

Cypress Investor Services  
188 The Embarcadero, Suite 420  
San Francisco, CA 94105

Please feel free to call Investor Services toll-free at (866) 866-9330 if you should have any questions.