

## ACH VOID CHECK APPROVAL FORM

Please attach voided check here.

*This form is required to establish TeleTransfer/ACH (in addition to a Brokerage Investor Services form) so that Dreyfus may obtain authorization of registrant(s) listed on your checking account that are not listed on your brokerage account.*

Please use this form as my authorization for:

\_\_\_\_\_ to use the attached  
*(brokerage account registrant(s))*

voided check from checking account number: \_\_\_\_\_

registered in the name of \_\_\_\_\_  
*(registrants of bank account)*

to establish TeleTransfer/ACH on his/her brokerage account number:

\_\_\_\_\_.

Sincerely,

\_\_\_\_\_  
*(Signature of bank account registrant  
not listed on brokerage account)*

\_\_\_\_\_  
Date

Please mail this completed form to:  
**DREYFUS BROKERAGE SERVICES**  
PO Box 9008  
Hicksville, NY 11802-9008

For Registered, Certified or Overnight Mail, please mail to:  
**DREYFUS BROKERAGE SERVICES**  
144 Glenn Curtiss Boulevard, 106-9501  
Uniondale, NY 11556-0144