



# Protect Your Family

PEACE OF MIND YOU CAN TRUST

303 Merrick Rd Suite #505 Lynbrook, NY 11563  
W: (516) 837-3737 F: (516) 837-9430 E: info@pyftrust.org  
www.pyftrust.org

## RECURRING REQUEST FORM

Automatic payments **MUST** be the same amount every month and will automatically be paid every month.

Please attach a copy of the bill, lease or invoice. All bills must be for the client and in the client's name.

The recurring request remains in effect until *PYF Trust* is notified in writing of any changes or cancellations. Do not resubmit this form every month.

Payments will only go out only if funds are available.

Client Name: \_\_\_\_\_

PYF Account Number: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Description of Request (i.e. Phone, Rent, Gas): \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Make check payable to: \_\_\_\_\_

Mail payment to: \_\_\_\_\_  
\_\_\_\_\_

Due Date of Payment (i.e. 5<sup>th</sup>, 15<sup>th</sup>): \_\_\_\_\_

\*Please note *PYF Trust* sends monthly payments out 7-10 Days in advance of listed due date.

Start Making Payment In (MONTH ONLY!): \_\_\_\_\_

Additional Info (i.e. account number, apartment number, invoice number):  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Client/Authorized Representative: \_\_\_\_\_

Date: \_\_\_\_\_