

# Auxiliary of the FRA

## Unit Financial Information

Unit Number and Name: \_\_\_\_\_ Region: \_\_\_\_\_

Bank Name: \_\_\_\_\_ (If Navy Fed attach a void ck)

Bank Routing Number: \_\_\_\_\_

Bank Account Number (needed for the deposit of the Unit's PCT):

\_\_\_\_\_

What type of account is this: Checking  Saving

Unit EIN Number: \_\_\_\_\_

Is the Unit's EIN Number on the bank account? \_\_\_\_\_  
Yes or No

Information on person filling out form.

Printed name: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Email address: \_\_\_\_\_

Signature of Person \_\_\_\_\_

Current Unit Office held: \_\_\_\_\_

Please send/scan a copy of this completed form to the National Treasurer,

Sharon Lippitt NT

lafrasharonlippitt@gmail.com

105 Buckingham Drive North

Leisure Knoll

Manchester NJ 08759