



Oregon State Treasury

LGIP Wire Instructions

Use this form to add/remove wire instructions for your pool accounts. Wire instructions must be set up before wire transactions can be processed. Submit this form through EON, or fax or mail this form to the fax number or address at the bottom of the page.

Participant Information

| | |
|-----------------------|--------------------------------|
| Local Government Name | Taxpayer Identification Number |
|-----------------------|--------------------------------|

List the pool account number(s) to which this form applies:

| | | | |
|----------------|-----------------|-----------------|-----------------|
| Pool Account 1 | Pool Account 2 | Pool Account 3 | Pool Account 4 |
| Pool Account 5 | Pool Account 6 | Pool Account 7 | Pool Account 8 |
| Pool Account 9 | Pool Account 10 | Pool Account 11 | Pool Account 12 |

Wire Instructions

Add Remove

| | | | |
|---------------------------------|---------------------|---------------------------------------|-------|
| Financial Institution Name | | City | State |
| Wire ABA Routing Transit Number | Bank Account Number | Nickname (Optional) | |
| Legal Account Owner | | Beneficiary Account Number (Optional) | |
| Beneficiary Details (Optional) | | | |

Signatures (Two different authorized contacts must sign)

| | | | | |
|------------------------------|--------------|-------------------------|----------------|------|
| Authorized Contact Signature | | Authorized Contact Name | | Date |
| Title | Phone Number | Ext. | E-mail Address | |

| | | | | |
|------------------------------|--------------|-------------------------|----------------|------|
| Authorized Contact Signature | | Authorized Contact Name | | Date |
| Title | Phone Number | Ext. | E-mail Address | |

| POOL USE ONLY | | |
|---------------|------|----------|
| | DATE | INITIALS |
| Processed | | |
| Confirmed | | |