Texas CLASS®

Depository Bank and Authorized Wire Accounts Amendment Form

Name of Public Entity: _____

Participant Account #: TX-01-_____

Please ◯ **ADD** / ◯ **DELETE** the following bank information for the named entity:
(Check one box)

_____
Bank Name *ABA Number*

_____
Bank Account Number(s)

_____

_____

_____
Additional Account Numbers

_____
Bank Address (Street, City, State, Zip Code)

( )
_____
Bank Contact *Telephone Number* *Extension*

Transmittal of funds using Fedwire and/or ACH ◯ *If ACH check one:* ◯ *Checking* ◯ *Savings*
Fedwire only ◯

Authorized wire and bank accounts approved by:

_____
Name *Title* *Date*

_____
Signature

Managed by Cutwater Asset Management
1700 Broadway, Suite 2050 • Denver, CO 80290 • 800.707.6242 • 877.311.0220 fax • www.texasclass.com