Louisiana Asset Management Pool, Inc.

Depository Bank and Authorized Wire Accounts Amendment Form

If you have any questions, please call the LAMPline at 1-800-272-8162.

Date effective: _____/_____/_____

Name of Public Entity: _____

Participant Account #: _____

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)	
Contact Person	*Telephone Number* ( ) *Extension*
Transmittal of funds using Fedwire and/or ACH ❑ *Fedwire only* ❑	*If ACH circle one: Checking / Savings*

Authorized wire and bank accounts authorized by:

Signature	*Title*	*Date* / /

Note: All completed forms should be mailed to: MBIA Municipal Investors Service Corp., 113 King Street, Armonk, New York 10504, Attention: Client Services or fax to (800) 604-6988.