

**Account Modification Form**

Participant Name \_\_\_\_\_ Part. No. \_\_\_\_\_

**A. General Information (update only if necessary)**

Mailing Address \_\_\_\_\_ City \_\_\_\_\_

County \_\_\_\_\_ ZIP \_\_\_\_\_ Contact Person \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

**B. Account and Bank-Related Information**

1. Account Information

Authority is hereby given to First Public, LLC, as Pool Administrator, to  modify  open an account to be named (e.g., General Fund, Debt Service Fund, etc.): \_\_\_\_\_

2. Local Depository Information (For your protection, each Pool Account may access only one local depository account.):

Bank Name \_\_\_\_\_ City \_\_\_\_\_

Bank Telephone Number \_\_\_\_\_ Bank Fax Number \_\_\_\_\_

Bank ABA Number (9 digits) \_\_\_\_\_ Bank Account Number \_\_\_\_\_

3. Corresponding Bank (if applicable):

Bank Name \_\_\_\_\_

Bank ABA Number (9 digits) \_\_\_\_\_ Bank Account Number \_\_\_\_\_

4. Deposit/Withdrawal Information and Authorization

Applicant hereby authorizes the Lone Star Investment Pool and its Administrator and Custodian to honor any Pool deposit or withdrawal request believed to be authentic. Money will be transferred only upon telephone, Web, IVR, written, or personal notice from an Authorized Representative of the Applicant. Upon such notification, debit or credit entries to the local depository account indicated above will be initiated, and the local depository named above is hereby authorized to further debit or credit the same to such account, as appropriate. Transfer shall be made by Automated Clearing House (ACH) Transfer unless otherwise directed by the Applicant.

**C. Participant Signature**

It is hereby certified that the Applicant has received a copy of the Information Statement relating to the Lone Star Investment Pool and has read, understands, and agrees to be bound by the terms thereof and the documents described therein. The information, certifications, and authorizations set forth in this application form are true and correct and shall remain in full force and effect until First Public, LLC, or its successor, receives written notification of a change.

Application is hereby made and executed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Name of Authorized Representative \_\_\_\_\_

Signature of Authorized Representative \_\_\_\_\_

Name of Authorized Representative \_\_\_\_\_

Signature of Authorized Representative \_\_\_\_\_