

West Virginia State Treasurer's Office

POLITICAL SUBDIVISION ACCOUNT REQUEST FORM AND ONLINE INVESTMENT ACCOUNT SYSTEM (iPAS) APPLICATION

| Political Subdivision: | | Tax ID: | | |
|--------------------------------------|------------------------|-------------------------|------------------|--|
| Street Address: | | Contact Name: | | |
| County: | | Phone No.: | | |
| City: State: | | Email Address: | | |
| ACCOUNT INFORMATION | | | | |
| Investment Account Name: | Bank | Name: | | |
| Routing Number: | Bank Account | Number: | | |
| Checking or Savings (check one) | Bank | Telephone: | | |
| Opening Deposit Amount: \$ E | ffective Opening Date: | | ACH (Preferred): | |
| POOL: WV Money Market WV Govt. Mone | y Market WV Short | MM DD YY Term Bond Pool | Check Enclosed: | |
| Investment Account Name: | Bank | Name: | | |
| Routing Number: Bank Account Number: | | | | |
| Checking or Savings (check one) | Bank | Telephone: | | |
| Opening Deposit Amount: \$E | ffective Opening Date: | MM DD YY | ACH (Preferred): | |
| POOL: WV Money Market WV Govt. Mone | y Market WV Short | Term Bond Pool | Check Enclosed: | |

Pursuant to the provisions of *W. Va. Code* § 12-6C-6, the undersigned, on behalf of the above-named Political Subdivision, does hereby request and authorize the West Virginia State Treasurer to establish Investment Account(s) in the name of the Political Subdivision with the Consolidated Fund. The West Virginia State Treasurer is hereby authorized and directed to initiate credit and debit entries as requested by the Political Subdivision, and to reverse any entries made in error into the checking/savings account indicated above. The Political Subdivision has authorized the Financial Institution named above to complete the transactions. This authority shall remain in full force and effect until the West Virginia State Treasurer has received written notification of termination from the Political Subdivision. Notification of termination much be received in a timely manner, so as to afford all parties a reasonable opportunity to act.

The Political Subdivision acknowledges that the Board of Treasury Investment ("BTI") uses the revenue in the Consolidated Fund to purchase securities and other investments as permitted by law and fully understands and agrees that all funds deposited into its Investment Account(s) will be managed and administered by the BTI and that said funds are subject to the risks and liabilities inherent to all such investment activities. The West Virginia State Treasurer's Office disclaims all liability for the management, investment or development of funds held, maintained and managed by the BTI.

The undersigned warrants that the governing body of the Political Subdivision has specifically authorized the establishment of one or more Investment Accounts in its name. A copy of said authorization is attached hereto and made a part hereof.

The undersigned acknowledges that the requested Investment Account(s) will be established and available for access within ten (10) days of the Effective Opening Date.

| Signature | Title | Email: |
|---|--------------|-------------|
| Printed Name | Date | Phone No.: |
| WVSTO Use: Date Received: First Transaction: | Copy to ACH: | iPAS Added: |

Please return to: West Virginia State Treasurer's Office • Attn: Participant Accounting 322 70th Street, Charleston, West Virginia 25304 • Phone: (304) 340-1573 or (304) 340-1577

| iPAS (the online investment account system) APPLICATION | | | |
|--|---|--|--|
| NEW USER MODIFY USER (Requested Change) | DELETE USER | | |
| PRINTED NAME: | EMAIL: (REQUIRED) | | |
| SIGNATURE: | DATE: | | |
| ACCESS LEVEL Investment Activity or | Inquiry Only | | |
| All Accounts or | Limit To: (List Accounts): | | |
| NEW USER MODIFY USER (Requested Change) | DELETE USER | | |
| PRINTED NAME: | EMAIL: (REQUIRED) | | |
| SIGNATURE: | DATE: | | |
| ACCESS LEVEL Investment Activity or | Inquiry Only | | |
| All Accounts or | Limit To: (List Accounts): | | |
| NEW USER MODIFY USER (Requested Change) | DELETE USER | | |
| PRINTED NAME: | EMAIL: (REQUIRED) | | |
| SIGNATURE: | DATE: | | |
| ACCESS LEVEL Investment Activity or | Inquiry Only | | |
| All Accounts or | Limit To: (List Accounts): | | |
| The Political Subdivision is responsible for and agrees to indemnify and hold harmle | uss to the extent permitted by law, the West Virginia State Treasurer for the | | |

The Political Subdivision is responsible for and agrees to indemnify and hold harmless, to the extent permitted by law, the West Virginia State Treasurer for the security of the User ID(s) and Password(s). The West Virginia State Treasurer will not be liable for any damages, liabilities or harm that may occur from the unauthorized use of the Political Subdivision's User ID(s) and Password(s). If the Political Subdivision becomes aware of any unauthorized use of its User ID(s) and Password(s), or believes that its security has been compromised, it must notify the West Virginia State Treasurer immediately. Upon receipt of such notice, the West Virginia State Treasurer will take reasonable steps to protect the account information, including, but not limited to, voiding the existing User ID(s) and Password(s) and issuing a new User ID(s) and Password(s).

PRINTED NAME:

TITLE:

DATE:

Form Updated January 2021