COMMERCE

Designation of Depository

Section 1 – Completed by MCR Grant Recipient

The (1) _____

Name, address, and zip code of grant recipient's bank

has been designated as the depository for all funds to be received from the Montana Department of Comemrce resulting from MCR contract # (2) **MT-MCR-_____.** for deposit to a non-interest bearing account.

(3) _____ (4) _____

Account name/number — Name of grant recipient

(5) _____ (6) _____

Address — Signature of CEO

(7) _____ (8) _____

Title of CEO — Date

Section II – Completed by Bank

The account identified in Section I has been established with this bank. All necessary documentation, including a power of attorney where necessary, which will legally enable this depository to receive state warrants from the State Auditor's Office for deposit to:

(9) _____

Account name and/or number

(10) _____

American Banker's Association routing number for electronic deposit

(11) _____ (12) _____

Name of bank — Address where checks should be mailed

(13) _____ (14) _____

Signature of authorized bank officer — Title of authorized bank officer

(15) _____

Date

COMMERCE

Instructions for Designation of Depository Form

(1) Enter name, address and zip code of depository (bank) designated to receive federal funds.

(2) Enter entire MCR contract number.

(3) Enter non-interest bearing bank account number where MCR funds are to be deposited.

(4) Enter name of MCR grant recipient: (City or Town of _____, or_____ County.)

(5) Enter complete mailing address of MCR recipient/grantee.

(6). Signature of Chief Elected Officer or Executive Officer of the MCR grantee.

(7) Enter the title of the CEO or Executive Officer for the MCR recipient.

(8) Enter date the form was signed by CEO or Executive Officer of MCR recipient.

(9) Enter same account number as in #3 above.

(10) Enter the American Bankers' Association Routing Number (if you are planning to utilize electronic deposit for MCR funds).

(11) Enter the same name of the depository (bank) as in #1 above.

(12) Enter the same address and zip code of the bank where MCR funds will be sent, as in #1 above.

(13) Enter the signature of authorized bank officer.

(14) Enter the title of the authorized bank officer for the depository bank.

(15) Enter the date form was signed by authorized bank officer.