

## ACCOUNT INFORMATION UPDATE FORM

New Mexico LO	GID	Date		□QED	e Posted	 Initial
		For LO	GIP use ONLY			
	al Government Investment Pool Federal Reserve Board, or any o d.					
*Only individ	uals who are listed on the	Certification of Author	rized Persons form are	allowed to subr	nit updates to	LGIP accounts.
Print Name		Title			Date	
*Authorized S	ignature:					
	the above information is	correct to the best of n	ny knowledge.			
		Reinvest	Disburse Via ACH			
	Please select how mon	thly investment earning	gs in this account shoul	d be handled:		
		_				
	V Dl-' ADA D				_	
			with this information,			
	Banking information (y	vour bank can assist vo	u with this information)	):		<b>–</b>
	Telephone Number:		_ Fax Number:			
	Email Address:					
	Mailing Address:					
	Contact Person:					
(	Please select the box(s) that		the specified account)			
	STO#:					
	Title of Account:					
	Name of Local Public Ent					