TexPool Prime Account Setup Form

Effective Date*

This letter authorizes TexPool Participant Services to copy the account(s) listed below from TexPool to TexPool Prime. All account information including banking instructions will be copied exactly from the existing TexPool accounts.

*Required Fields

1. Participant Information

Participant Name*

Location Number*

2. Instructions

TexPool (449) Account Number(s) to be copied to TexPool Prime (590):

3. Signatures

Note: This authorization must be executed by two current Authorized Representatives for the Participant as set forth in the fully enacted Resolution of the Participant, which is on file with TexPool Participant Services.

As a current Authorized Representative, I certify that the above information is both true and correct.

Signature of First Authorized Representative*

Date*

Printed Name*

Telephone Number*

Title*

Email*

Signature of Second Authorized Representative*

Date*

Printed Name*

Telephone Number*

Title*

Email*

4. Delivery Instructions

Please return this document to **TexPool Participant Services:**

Email: texpool@dstsystems.com

Fax: 866-839-3291