

SOUTH CAROLINA LOCAL GOVERNMENT INVESTMENT POOL
FUNDS DEPOSIT / WITHDRAWAL REQUEST FORM

LOCAL GOVERNMENT UNIT: _____

FUNDS DEPOSITED INTO LGIP:

Check: _____ **Wire:** _____ **Internal Transfer:** _____

Deposit Amount: _____

Credit to Account Number

Transaction Date

Wired From (Bank Name): _____

Account #: _____

FUNDS WITHDRAWN FROM LGIP:

Check: _____ **Wire:** _____ **Internal Transfer:** _____

Withdrawal Amount: _____

Debit to Account Number

Transaction Date

Wire To (Bank Name): _____

ABA #: _____

Account #: _____

Special Instructions: _____

AUTHORIZED BY:

Signature

Title

(Please Print Name)

Date

(Note: Internal transfers will be treated as deposits and withdrawals.)

PLEASE DO NOT WRITE BELOW THIS LINE.

Debit Acct: _____

Credit Acct: _____

Trans Code: _____

Debit Acct: _____

Credit Acct: _____

Trans Code: _____

TRANSACTION CODES

- | | | |
|---------------------|---------------------|----------------|
| 1) DEP WIRE | 5) W/D WIRE | 9) (OPERATING) |
| 2) DEP CHECK | 6) W/D CHECK | |
| 3) DEP TRANSFER | 7) W/D TRANSFER | |
| 4) DEP INT TRANSFER | 8) W/D INT TRANSFER | |

Please Return To: Connie Adams, SC State Treasurer's Office
Phone: (803) 734-2661
Fax: (803) 343-0141 or (803) 734-2697