STATE OF KANSAS MUNICIPAL INVESTMENT POOL

Password Designation Form

Each representative of the municipality authorized to make deposits and withdrawals from the municipality's account must complete a Password Designation Form.

PASSWORD DESIGNATION
Account Name
Representative Name (print or type)
E-Mail Address
Phone Number
Verbal Password (8 - 12 digits, alpha or numeric)

REPRESENTATIVE SIGNATURE	
Signature	Date

This confidential password will remain in effect until the above representative provides written notification of a password change or the municipality's governing body adopts a new Resolution designating different authorized representatives.