

**ARKANSAS STATE TREASURY  
DESIGNATION OF AUTHORIZED REPRESENTATIVES**

**WHEREAS**, \_\_\_\_\_ is a [national] [state chartered] banking association with its principal office at \_\_\_\_\_; and

**WHEREAS** \_\_\_\_\_ wishes to serve as a designated depository for Arkansas State Treasury funds; and

**NOW, THEREFORE**, as authorized by Certificate of Corporate Resolutions as a part of the Security Agreement for Funds Held in Deposit between the Treasurer of the State of Arkansas and \_\_\_\_\_, I, \_\_\_\_\_, hereby designate the representatives listed below or attached as duly authorized to transact business with the Treasurer of the State of Arkansas.

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

BY:

Signature \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

ATTEST:  
\_\_\_\_\_