

COLLATERAL INSTRUMENTS PLEDGE - PUBLIC ENTITY

_____ Instrument Description
_____ / _____ / _____ Issuer Issue Date
_____ I.D. Number Custody Receipt Number
_____ / _____ / _____ Maturity or Expiration Date

\$ _____
Original Face Amount

 Name of Pledgor Bank Mailing Address of Pledgor Bank

 Signature of Duly Authorized Bank Officer of the Pledgor Bank Date

 Name and title of Duly Authorized Bank Officer (Please type or print clearly) Public Entity Treasurer Date
 Submit Original Form with each Collateral Instrument to:

 Name of Public Entity

 Mailing Address

 City, State & ZIP Code _____

SUBSTITUTION Is the Above Pledge a Substitution of Collateral?
 Yes _____ No _____

If yes, please provide the following information about the collateral being substituted:

Previous Pledge Number: _____

RELEASE OF COLLATERAL

As a Duly Authorized Bank officer of _____, I hereby request release of the above described Public Entity Pledge number _____.

 Signature of Duly Authorized Bank Officer of the Pledgor Bank Date

 Name and title of Duly Authorized Bank Officer (please type or print clearly) Public Entity Treasurer Date