



Receipt for Certificate of Deposit Time Account

Product: PF 365 DAYS	Account #:
Date: 05/19/2017	Account Owner(s) and Mailing Address:
Plan ID#: 000	OKLAHOMA CITY MUNICIPAL FACILITIES
New <input type="checkbox"/> Rev <input checked="" type="checkbox"/> CSR: JSTOCKMAN	100 N WALKER AVE 2ND FL
Comments:	OKLAHOMA CITY, OK 73102-2230
This account is opened with the following type of account title:	

Payor's Request for Taxpayer's Identification Number and Certification		Taxpayer Identification Number:
Certification • Under penalties of perjury, I certify that:		
(1) The number shown on this form is my correct taxpayer identification number and		
(2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding.		
(3) I am a U.S. Person (Including a U.S. resident alien)		
Certification Instructions – You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, the acquisition or abandonment of security property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN.		
Signature:		Date:
Account Term		
Interest Rate: .150%	APY: .15%	Rate Changer: N
Opening Date: 03/12/2017		Opening Deposit: 5,208.82
Term: 365 Days	Maturity Date: 03/12/2018	Signatures Required for Withdrawal: 1
Deposit Consisting Of:		

Account Options	
<input type="checkbox"/> Maturity <input type="checkbox"/> Single Maturity <input checked="" type="checkbox"/> Automatic Renewal	<input type="checkbox"/> Interest will be paid every 1 month
<input type="checkbox"/> Interest will be paid by:	<input type="checkbox"/> Check <input checked="" type="checkbox"/> Add it back to account principal
<input type="checkbox"/> Transfer to another financial institution:	<input type="checkbox"/> Transfer to checking/savings account #
Bank Name:	R/T #: Account #: ACH trancode:

THIS BOOK ENTRY ACCOUNT IS SUBJECT TO THE BANCFIRST DEPOSIT AGREEMENT

THIS ACCOUNT IS NOT NEGOTIABLE AND IS NOT TRANSFERABLE

Authorized Bank Signature: 

BANK USE ONLY

Processed By:

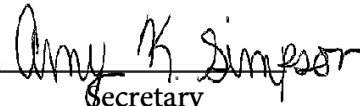
Branch:

Date:

APPROVED by the Oklahoma City Municipal Facilities Authority this 20TH day of JUNE, 2023.


CHAIRMAN

ATTEST:


Secretary



Reviewed for form and legality. ★


Assistant Municipal Counselor