



Office of the State Treasurer

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EXHIBIT B – PUBLIC DEPOSITOR INFORMATION

State Depository Board Deposit Placement Program Policy

Name of Public Body	_____
FEIN of Public Body	_____
Officer to Hold Public Funds	_____
Address	_____

Email	_____
Telephone	_____
Date	_____

Name of each financial institution where public funds have been or will be initially placed as part of a deposit placement arrangement as contemplated by O.C.G.A. § 45-8-14.1.

Name of each approved third-party service provider which is providing or will provide the deposit placement services contemplated by O.C.G.A. § 45-8-14.1.

Note: The State Depository Board and Office of the State Treasurer of Georgia advise public depositors against the use of more than one third-party service provider at any time.
