



OKLAHOMA LIQUID ASSET POOL

How to Open an Account with OLAP

1. RESOLUTION

To become a member of the Oklahoma Public School Investment Interlocal and take advantage of its programs, your entity must pass a resolution approving participation. The resolution must be attached to the Account Application.

2. ACCOUNT APPLICATION

The application must be completed and accompanied by the Resolution in order to establish an account with the pool.

3. ADDENDUMS TO ACCOUNT APPLICATION

- **Additional Account Authorization** – Complete this form to establish any additional accounts. This may be submitted along with your Application or at any time thereafter.
- **Authorized Users** – Complete this form at any time after the establishment of your account to change the authorized officials. This change will apply to all sub-accounts. If changes affect authorized check signatories, please complete a new bank signature card for each checking account.

After an application is received by the OLAP Administrator, it will take approximately two days to open an account and assign an account number. Once the account is open, the Participant may make purchases and redemptions according to the “Transaction Guide”.

All completed forms should be mailed to the OLAP Administrator at the following address:

**Oklahoma Liquid Asset Pool
OLAP Administrator
1415 28th Street, Suite 200
West Des Moines, IA 50266-1461**

For more information, please call the OLAP Administrator at 1-866-472-OLAP (6527).



OKLAHOMA LIQUID ASSET POOL
Resolution Authorizing Participation in the Pool

The Board of Education of _____ School District No. _____ of
_____ County, Oklahoma, also known as _____
School

District, hereby votes at a duly called meeting of the Board to:

1. Become a member of the "Oklahoma Public School Investment Interlocal", an interlocal cooperative approved by the Oklahoma State Board of Education on July 25, 1996, and given the official designation as Interlocal Number 55K001 by the State Department of Education, and to approve those directors previously elected as the Board of Directors of the Interlocal by the initial participating school districts.
2. Authorize the School District Treasurer to invest and withdraw available school funds in either the Interlocal's Liquid Asset Pool or Fixed Income Investment Program, or both; and
3. Inform the Interlocal that the School District's Treasurer is:

ADOPTED and APPROVED this _____ day of _____, _____.

President, Board of Education

ATTEST:

Clerk, Board of Education



OKLAHOMA LIQUID ASSET POOL

Application Form

I. Basic Information

Name of School District: _____

Federal Identification Number: _____

Contact Person and Title: _____

Address: _____

Email Address: _____

Telephone Number: (_____) _____ Fax Number: (_____) _____

IF INITIAL INVESTMENT IS ENCLOSED, PLEASE INDICATE AMOUNT \$ _____
(Payable to Oklahoma Liquid Asset Pool)

II. Account Information

Authorization is hereby given to Miles Capital, as OLAP Administrator, to open the following Oklahoma Liquid Asset Pool Account(s).

Name to appear on OLAP Account (e.g. General Fund, etc.)* _____

Name and Address of Local Depository for funds transfer _____

Local Depository Account Number _____ Checking Savings

Depository's ABA Routing Number _____
(This number can be obtained from bottom of blank check or by calling your depository)

III. Deposit/Withdrawal Information and Authorization

Authorization is given to Miles Capital, as the OLAP Administrator, to honor any request believed to be authentic for investment to or withdrawal from OLAP. Moneys will be transferred only upon telephone, online, written or personal notice from an Authorized Official of the School District. Upon notification, the Administrator will initiate a debit and credit entries to the local depository account(s) indicated and the local depository(ies) are authorized to debit and credit the same to such account(s). Transfer must be made Automated Clearinghouse Transfer (ACH), if available, unless otherwise directed by the School District. There is no direct charge for ACH transfers.

IV. Information Statement and Interlocal Cooperative Agreement

It is hereby certified that the School District has received a copy of the Information Statement of OLAP and a copy of the Interlocal Cooperative Agreement and agrees to be bound by the terms of such documents.

V. Effectiveness of Application Form

The information, certifications and authorizations set forth on this application shall remain in full force and effect until the OLAP Administrator receives written notification of a change.

VI. Authorized Signatures

The following are Authorized Officials of this School District to effectuate the investment and withdrawal of moneys of this School District from time to time in accordance with the Information Statement and Interlocal Cooperative Agreement.

Name of School District _____

Print or Type Name of Authorized Official *Title* *Signature (Authorized Official)* *Date*

Print or Type Name of Authorized Official *Title* *Signature (Authorized Official)* *Date*

Print or Type Name of Authorized Official *Title* *Signature (Authorized Official)* *Date*

VII. Application Signature

Application is hereby made this _____ date of _____, _____.

Name: _____ Title: _____

Signature: _____

This application form must be signed by an official authorized by Resolution to Transact business with OLAP.

Mail this completed form to:
Oklahoma Liquid Asset Pool
OLAP Administrator
1415 28th Street, Suite 200
West Des Moines, IA 50266-1461

If you have questions, call an OLAP
Administrator at 866-472-OLAP (6527).

This form may be photocopied.

* For additional OLAP accounts, use space provided on Additional Account Authorization form.