



**STATE OF TENNESSEE  
TREASURY DEPARTMENT  
CASH MANAGEMENT  
11TH FLOOR, ANDREW JACKSON BUILDING  
NASHVILLE, TENNESSEE 37243-0244**



**LGIP TRANSACTION REQUEST SHEET  
FAX NUMBER (615) 741-0755**

DELIVER TO: LGIP Office (615) 532-1163

FROM: \_\_\_\_\_

DATE: \_\_\_\_\_

We are sending \_\_\_\_ pages to you (including this cover sheet). If you need a resend of any page, call ( ) \_\_\_\_\_. If you do not call, we will assume you received the pages satisfactorily.

**LGIP TRANSACTION INSTRUCTIONS**

Request Date: \_\_\_\_\_ Transaction Date: \_\_\_\_\_

Participant's Phone Number: \_\_\_\_\_

Transaction Type:  Deposit  Withdrawal  Transfer

Transaction Description: Withdraw From LGIP Account Number: \_\_\_\_\_

Deposit to LGIP Account Number: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Entity Name: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Typed/Printed Name and Title: \_\_\_\_\_

Bank's Name: \_\_\_\_\_

Bank's Account Number: \_\_\_\_\_

**FOR LGIP USE ONLY**

Ticket # \_\_\_\_\_ Bank T/R # \_\_\_\_\_ Account Balance \_\_\_\_\_

Correspondent Bank Name \_\_\_\_\_ Correspondent Bank T/R # \_\_\_\_\_