

Form 2
Bank Designation and Check Signature Form

SECTION I (To be completed by Grantee)

(1) Name, permanent address and zip code of Grantee (City/County):

(2) Name, street address and zip code of ACH or ACH-capable bank to receive deposits:

has been designated as the depository for all grant funds to be received directly from the State of Arkansas for deposit to a non-interest bearing account,

(3) Name and number of account in the preceding blank

resulting from Grant Control Number _____,

(4) Grant Control Number from grant agreement in the preceding blank executed with the Arkansas Economic Development Commission.

(5) Typed names and signatures of persons authorized to sign checks (See **Note 1.**)

 (Typed name/signature)

 (Typed name/signature)

 (Typed name/signature)

 (Typed name/signature)

Statement of Grantee
I/We understand that disbursements from the account may be made only for authorized costs of the project.
_____ (Signature/title of Chief Executive Officer) (i.e. Mayor or County Judge)
_____ (Date)

SECTION II (To be completed by the Bank Official)

A non-interest bearing account identified in Section I has been established with this bank. All necessary documentation, including a power of attorney (where necessary), which will legally enable this depository to receive State of Arkansas warrants for deposit to _____ without the

payee's endorsement has been received and is in this depository's custody. This bank is a member of the FDIC.

_____ Name of bank	_____ Mailing address of bank
_____ Telephone number of bank	_____ City, state and zip code of bank
_____ Title of authorized bank official	_____ Signature of authorized bank officer
_____ Date	

Note 1: Must have a minimum of two and a maximum of four signatures of individuals authorized to make disbursements (write checks). The County Judge cannot sign county checks. Individuals signing disbursement checks cannot sign RFPs.

Form 2-I
Instructions for Completing the
Bank Designation and Check Signature Form

Section I

1. Enter the Grantee's name, permanent address and zip code.
2. Enter the name, street address and zip code of the Automated Clearing House or Automated Clearing House-capable bank that will receive direct deposits or deposits of grant funds.
3. Enter the name and number of the bank account established to receive grant funds.
4. Enter the Grant Control Number identified in the grant agreement.
5. Enter the typed names and signatures of all individuals authorized to sign bank account checks. At least two signatures must be provided. Such individuals cannot be authorized to sign Requests for Payment forms. The Statement of Grantee section must be signed by the same official that signed the grant agreement.

Section II

All sections must be completed to provide specific information regarding the bank, which will receive the grant funds.

Each item is self-explanatory.