



THE CITY OF NEW YORK
 OFFICE OF THE COMPTROLLER
 1 Centre Street, Room 200 South
 New York, New York 10007

Select One Option:

Retainage

Franchise

Date: _____

New Transaction Request

Deposit Substitution Release

Vendor Name: _____ Account #: _____
 Address: _____ Contract #: _____
 City: _____ State: _____ Zip: _____ Beginning MMV
 Email Address: _____ Payee/Vendor #: _____ Change in
 (for Franchise use Tax Id#) _____ MMV
 Clearing Agent #: _____ Clearing Agent Name: _____ Total MMV
 BrokerAgent #: _____ Account # to Clearing Agent #: _____

*All Released Funds and Securities will be delivered to the broker account

Description of Securities			Value		Date		
<u>Substitution</u> (Select one)	Cusip- Description	Coupon Rate	Market	Par	Trade	Settlement	Maturity

Citi Bank Delivery Instruction	For Custodial Unit Use Only
<u>DTC</u> Citibank #0908 Customer Six-Digit Custody Account # with Citibank: Customer Name: Agent ID: 27603 Institution ID: 29424	<u>FED</u> CITIBANK NYC/CUST Customer Six-Digit Custody Account # with Citibank: Customer Name: ABA #021000089 DDA: 36854059
Received By & Date: _____ Transaction Created By & Date: _____ Verified, Authorized & Released By & Date: _____	

There is a \$375.00 annual custodial Fee that must be collected in order to process new account deposits.

****All information is Required. Transactions will NOT be processed if incomplete information is submitted****
 For any questions please contact the Custodial Accounts Unit [CustodialUnit@comptroller.nyc.gov]