



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]