



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 as instructed unless noted otherwise

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

Citi Bank Delivery Instruction

<u>DTC</u> Citibank Participant Code: 0908 Six-Digit Custody Account # with Citibank: Account Name: Agent ID: 26074 TradeSuite ID: 30860	<u>FED Settlement</u> CITIBANK NYC/CUST Six-Digit Custody Account # with Citibank: Account Name: ABA #021000089	<u>FED Wire Cash</u> CITIBANK, N.A., NEW YORK SWIFT BIC: CITIUS33 ABA Routing Number: 021000089 Cash Account Number: Account Name:
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There is a \$375.00 annual custodial fee that must be collected in order to process new account deposits.

For Custodial Unit Use Only: Received By: Date:

****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] **R.23**