

Exhibit 2-D
Designation of Depository for Direct Deposit of MCEP Funds

SECTION I (To be completed by MCEP recipient)

The _____
Name, Address and ZIP Code of MCEP Recipient's Bank
has been designated as the depository for all funds to be received from the Montana Department of Commerce resulting from MCEP Contract No. _____
MT-MCEP-_____ for deposit to: checking or savings

Account Name / Account # / American Bankers Association # (ABA –Routing/Transit)

Name of Grant Recipient *Address*

Signature of Chief Elected Official *Date* *Title of Chief Elected Official*
or Executive Officer *or Executive Officer*

Email address for notification of payments made to grantee from MCEP

Section II (To be completed by the bank)

The 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 warrants from the State Auditor's Office for deposit to:

Account Name and/or Number

Name of Bank _____
Address

Signature of Authorized Bank Officer _____
Title of Authorized Bank Officer

Date