



## Transfer Form

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(for transfers ***between Participants***)

Today's Date: \_\_\_\_\_

Transaction #: \_\_\_\_\_  
(for Cutwater use)

Transaction Date: \_\_\_\_\_

Transaction #: \_\_\_\_\_

**The transfer of funds between Participant accounts must be initiated via fax (800-765-7600) or through Client Services at 800-395-5505.**

Name of Public Entity \_\_\_\_\_

Name of PDIP Account Transferring **FROM** \_\_\_\_\_

PDIP Account # NH-01- \_\_\_\_\_

Amount of Transfer \$ \_\_\_\_\_

\_\_\_\_\_ DOLLARS

Name of PDIP Account Transferring **TO** \_\_\_\_\_

PDIP Account # NH-01- \_\_\_\_\_

Authorized Signatory \_\_\_\_\_

**For Cutwater Use:**

Verification of Funds Availability \_\_\_\_\_

**For Cutwater Use:**

Cutwater Confirmation Signature \_\_\_\_\_