



9. Public Depositor Name: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Reason Account Excluded from SDP: \_\_\_\_\_
10. Public Depositor Name: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Reason Account Excluded from SDP: \_\_\_\_\_
11. Public Depositor Name: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Reason Account Excluded from SDP: \_\_\_\_\_
12. Public Depositor Name: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Reason Account Excluded from SDP: \_\_\_\_\_
13. Public Depositor Name: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Reason Account Excluded from SDP: \_\_\_\_\_
14. Public Depositor Name: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Reason Account Excluded from SDP: \_\_\_\_\_
15. Public Depositor Name: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Reason Account Excluded from SDP: \_\_\_\_\_
16. Public Depositor Name: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Reason Account Excluded from SDP: \_\_\_\_\_
17. Public Depositor Name: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Reason Account Excluded from SDP: \_\_\_\_\_
18. Public Depositor Name: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Reason Account Excluded from SDP: \_\_\_\_\_
19. Public Depositor Name: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Reason Account Excluded from SDP: \_\_\_\_\_
20. Public Depositor Name: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Reason Account Excluded from SDP: \_\_\_\_\_
21. Public Depositor Name: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Reason Account Excluded from SDP: \_\_\_\_\_
22. Public Depositor Name: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Reason Account Excluded from SDP: \_\_\_\_\_
23. Public Depositor Name: \_\_\_\_\_  
City/State: \_\_\_\_\_  
Reason Account Excluded from SDP: \_\_\_\_\_

24. Public Depositor Name: \_\_\_\_\_  
 City/State: \_\_\_\_\_  
 Reason Account Excluded from SDP: \_\_\_\_\_
- 
25. Public Depositor Name: \_\_\_\_\_  
 City/State: \_\_\_\_\_  
 Reason Account Excluded from SDP: \_\_\_\_\_
- 

**SECTION C**

*The accounts listed above have been approved by the respective Public Depositors to be excluded from the Secure Deposit Program due to statutory or regulatory requirements stipulating that pooled collateral is not required or acceptable.*

BY: \_\_\_\_\_  
 Authorized Signature of Covered Depository

Name: \_\_\_\_\_

Title: \_\_\_\_\_

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

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**SECTION D** [This section to be completed only by the Office of the State Treasurer.]

*For a Covered Depository having investment deposits with the Office of the State Treasurer that meet criteria determined by the policy of the State Depository Board exempting such deposits in the SDP, the State Treasurer will notify the Covered Depository that such account(s) is exempt.*

**Covered Depository**

Account Name: \_\_\_\_\_

Account Name: \_\_\_\_\_

Account Name: \_\_\_\_\_

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*Accounts listed above in Section B and D (if applicable) have been approved as exempt from SDP.*

**Acknowledged and Approved:**

BY: \_\_\_\_\_  
 Office of the State Treasurer

DATE: \_\_\_\_\_

Approved by the State Depository Board on October 4, 2023.