

**COLLATERAL INSTRUMENTS
PLEDGE FORM--STATE**

| | | | |
|---------------------------------|--------------------------|--------|----------|
| Bank Code | 1 | 000 | 000 |
| Pledge | <input type="checkbox"/> | County | City |
| | Active | | Inactive |
| FOR TREASURER'S USE ONLY | | | |

| | |
|------------------------------------|-------------------|
| Instrument Description | |
| Issuer | / / Issue Date |
| Custody Receipt Number | I.D. Number |
| / / Maturity or Expiration Date | |
| \$ _____ Original Face Amount | |

Name of Pledgor Bank _____ City _____ Mailing Address _____

Signature of Duly Authorized Bank Officer _____ Date _____ Security Registrar, State Treasurer's Office _____ Date _____

Name and title of Duly Authorized Bank Officer
(Please type or print clearly)

Submit Original Form with each Collateral Instrument to:
Oklahoma State Treasurer
217 State Capitol
2300 N. Lincoln Blvd.
Oklahoma City, OK 73105

SUBSTITUTION

Is the Above Pledge a Substitution of Collateral?

If yes, please provide the following information about the collateral being substituted:

Yes No

State Treasurer's Previous Pledge Number: _____

RELEASE OF COLLATERAL

As a Duly Authorized Bank Officer of _____, I hereby request release of the above described State Treasurer's Pledge Number: _____.

Signature of Duly Authorized Bank Officer _____ Date _____ Security Registrar, State Treasurer's Office _____ Date _____
of the Pledgor Bank

Name and title of Duly Authorized Bank Officer
(Please type or print clearly)

FOR TREASURER'S USE ONLY

Pledge Entered by: _____ Date: _____

Changes: _____

Released Entered by: _____ Date: _____

STATE TREASURER'S PLEDGE NUMBER