

INTEREST ON LAWYERS TRUST ACCOUNTS OF LOUISIANA

Rate/Product Adjustment Request Form

This form must be completed prior to any rate/offering/product adjustment, signed by the Chief Executive Officer or other authorized officer, and returned to the Louisiana Bar Foundation by physical or electronic mail. This form must be accompanied by the appropriate documentation as listed below.

Adjustment Request:

 Rate Adjustment (*Attach substantiating documentation, Internal RATE SHEET on all deposit/investment accounts, Internal Deposit Accounts Rate Specification report, explanatory product literature and disclosures in support of the election in Option B, all documentation, and disclosures for business sweep products, if offered*)

Current Interest Rate _____ to Adjustment Rate _____

 Product Adjustment (*Attach substantiating documentation, Internal RATE SHEET on all deposit/investment accounts, Internal Deposit Accounts Rate Specification report, explanatory product literature and disclosures in support of the election in Option B, all documentation, and disclosures for business sweep products, if offered*)

Current Product _____ to Adjustment Product _____

Declaration of the Financial Institution: *We have reviewed the Adjustment/Product Request Form above.*

Name of financial institution: _____

Name of person executing the form: _____

Title: _____

Address: _____

Telephone: _____ E-mail: _____

Contact person (if different from above): _____

Title: _____

Address: _____

Telephone: _____ E-mail: _____

I certify that the above information is accurate.

Signature: _____ Date: _____

To be completed by IOLTA Compliance Staff only:

The above adjustment request is:

Acknowledged on: _____; or Pending further review as of: _____

Tina Ferrera, IOLTA Manager/Senior Accounting Specialist; tina@raisingthebar.org
Alan Abadie, Jr., Chief Financial Officer; alan@raisingthebar.org

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