

**EXHIBIT 2-D**

**DESIGNATION OF DEPOSITORY FOR DIRECT DEPOSIT OF TSEP FUNDS**

**SECTION 1 (To be completed by TSEP recipient)**

The \_\_\_\_\_ *Name,  
Address and ZIP Code of TSEP Recipient's Bank*

has been designated as the depository for all funds to be received from the Montana Department of Commerce resulting from TSEP Contract No.

MT-TSEP-\_\_\_\_\_ 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  
or Executive Officer*

\_\_\_\_\_  
*Title of Chief Elected Official  
or Executive Officer*

\_\_\_\_\_  
*Date*

**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*

The Depository hereby agrees to immediately notify the Recipient when a deposit is made in the above account.

\_\_\_\_\_  
*Signature of Authorized Bank Officer*

\_\_\_\_\_  
*Title of Authorized Bank Officer*

\_\_\_\_\_  
*Date*