Oregon Department of Consumer & Business Services Division of Financial Regulation 350 Winter St. NE, Rm. 410, Salem, Oregon 97301-3881 Mailing address: P.O. Box 14480, Salem, OR 97309-0405 503-947-7300 • Fax: 503-947-7862 • dfr.oregon.gov dfr.ndp.licensing@dcbs.oregon.gov



NOTICE OF APPOINTMENT OF SUCCESSOR DEPOSITORY OR MASTER TRUSTEE

(relating to prearrangement and/or preconstruction contracts)

Today's date:

In accordance with the provision of ORS 97.941(8), a 30-day notice of appointment of a successor depository or master trustee is hereby provided to you.

Transfer of funds will occur on this date:

Existing depository or master trustee	New depository or master trustee
Name:	Name:
Address:	Address:
City, State, ZIP:	City, State, ZIP:
Account no.:	Account no.:
Printed name and signature of authorized representative:	Printed name and signature of authorized representative:

Name of certified provider requesting transfer

CP#: _____

Name:

Address:

City, State, ZIP:

Printed name and signature of authorized representative:

This form may be photocopied.

