

**WYO-STAR**  
**Electronic Funds Transfer Bank Information**

Name of Participant: \_\_\_\_\_

Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

WYO-STAR Account #: \_\_\_\_\_

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

Bank Routing Number (For ACH Transaction): \_\_\_\_\_

Bank Account Type (check one):        \_\_\_\_\_ Checking Account        \_\_\_\_\_ Savings Account

Bank Account Number: \_\_\_\_\_

WYO-STAR Account #: \_\_\_\_\_

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

Bank Routing Number (For ACH Transaction): \_\_\_\_\_

Bank Account Type (check one):        \_\_\_\_\_ Checking Account        \_\_\_\_\_ Savings Account

Bank Account Number: \_\_\_\_\_

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

Return form to:

Cindy Braden, Investment Accountant  
Wyoming State Treasurer  
State Capitol, Room 121  
Cheyenne, Wyoming 82002  
Phone: 777-7297  
Fax: 777-3731