



California State Treasurer's Office  
Local Agency Investment Fund (LAIF)

Request for Agency Address Change

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

LAIF Account #: \_\_\_\_\_

Agency Name: \_\_\_\_\_

Attention (title only): \_\_\_\_\_

New Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Two authorized signatures required.** Each of the undersigned certifies that he/she is authorized to execute this form under the agency's resolution, and that the information contained herein is true and correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Phone Number

Please provide email address to receive LAIF email notifications.

| Name  | Email |
|-------|-------|
| _____ | _____ |
| _____ | _____ |

Please email the completed form for review to [laif@treasurer.ca.gov](mailto:laif@treasurer.ca.gov) and allow 2 days for a response. **DO NOT** mail the original form until you receive approval.

Mail the approved form to: CA State Treasurer's Office  
Local Agency Investment Fund  
P.O. Box 942809  
Sacramento, CA 94209-0001

## **Address Change Form Instructions:**

**Step 1:** Fill out your agency information in the top section.

Date:

LAIF Account #:

Agency Name:

**Step 2:** Fill out the attention section which should be by title only. Fill out the new mailing address including the address, city, state, and zip code.

Attention (title only):

New Mailing Address:

Phone Number:

**Step 3:** Fill out the bottom section if anyone from your agency would like to receive email notifications from LAIF.

Please provide email address to receive LAIF email notifications.

Name

Email

|                      |                      |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |

**Step 4:** Have the form signed by two individuals authorized per your LAIF resolution.

**Step 5:** Email copies of the Agency Address Change form to [laif@treasurer.ca.gov](mailto:laif@treasurer.ca.gov) for review. Once you receive approval from LAIF staff, please mail the original Address Change form with the wet signatures.