



**Curtis M. Loftis, Jr.**  
STATE TREASURER OF SOUTH CAROLINA

**SOUTH CAROLINA LOCAL GOVERNMENT INVESTMENT POOL  
APPLICATION FORM**

Date: \_\_\_\_\_  
Local Government Unit: \_\_\_\_\_  
Suggested Account Title: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Tax I.D. Number \_\_\_\_\_

Employees authorized to make investment transactions with the Local Government Investment Pool on behalf of this Local Government body: **\*2 signatures are required\***

_____ (Name)	_____ (email)	_____ (Phone #)
_____ (Signature)	_____ (Title)	
_____ (Name)	_____ (email)	_____ (Phone #)
_____ (Signature)	_____ (Title)	
_____ (Name)	_____ (email)	_____ (Phone #)
_____ (Signature)	_____ (Title)	

Please Return To: SC State Treasurer's Office  
Email: [sto.lgip@sto.sc.gov](mailto:sto.lgip@sto.sc.gov)  
Contact: Courtney Hogue 803.734.2110