



**STATE OF CONNECTICUT  
DEBT SERVICE EXPRESS PROGRAM**

**Procedures**

The following procedures shall govern the implementation of the Debt Service Express Program, which provides municipal investors (the "Issuer") an opportunity to make Debt Service payments of principal and interest to its bond paying agent U.S. Bank National Association (the "Paying Agent"), directly from such Issuers' Short Term Investment Fund ("STIF") accounts. These procedures shall remain in effect until amended, in writing, by the State of Connecticut, Office of the State Treasurer (the "State"). U.S. Bank National Association (the "Paying Agent") and Boston Financial Data Services (BFDS) shall abide by these procedures in their entirety.

To participate in the Debt Service Express Program:

1. Each Issuer must direct, in writing to the State and the Paying Agent that its Debt Service Fund payments be directly debited from its STIF account. Such direction shall be in the form of the Debt Service Express Program form and the Investor Registration form, each with instructions. The State shall provide and deliver Exhibits B and K to the Issuers.
2. The Debt Service Express Program form and Investor Registration form may be submitted to the State by facsimile transmission or mail.
3. The State shall forward copies of executed forms to the Paying Agent and BFDS.
4. The Paying Agent shall establish a direct debit process for each Issuer and shall inform each Issuer of the scheduled date of the first debit. Notice may be given to the Issuer by telephone with a confirmation in writing by mail or facsimile transmission.
5. The Paying Agent shall be notified of Issuer's direction to establish the direct debit process not more than 60 days or less than 30 days from the next payment date.
6. The Paying Agent shall furnish BFDS with a list of all Issuers being paid by direct debit, together with principal and interest schedule for each Issue, no fewer than three days prior to any payment date.
7. Funds shall be created to the Paying Agent's DDA 173103321191 by 11:00 a.m. on each payment date.

RECEIPT ACKNOWLEDGED:

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Authorized Representative  
U.S. Bank National Association

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Authorized Representative  
Boston Financial Data Services (BFDS)

CONNECTICUT STATE TREASURER  
SHORT-TERM INVESTMENT FUND



**Authorization Form**  
**Debt Service Express Program**

I \_\_\_\_\_, being a duly authorized representative of  
(Name of Authorized Representative/Officer)

\_\_\_\_\_  
(Name of Town and Office Represented Example: Town of XXXXX, Treasurer's Office)

located at \_\_\_\_\_,  
(Address)

do hereby authorize U. S. Bank N. A. to charge my State of Connecticut – Short-Term Investment Fund (STIF)  
account No. \_\_\_\_\_, for payments due on the Debt Service Issues listed, either by the Debt  
Service Payment Schedule (see form below) or by our Amortization Schedule.

U.S. Bank, National Association, as Paying Agent, agrees to continue to mail Maturity Bills to the above issuer,  
as notification, that a particular Debt Service Payment is due on a specified payment date.

\_\_\_\_\_  
(Signature and title of Authorized Representative)

\_\_\_\_\_  
(Telephone Number)

Date \_\_\_\_\_

\_\_\_\_\_  
(FAX Number)

Acknowledged: \_\_\_\_\_  
(Authorized Representative/State of Connecticut)

Date \_\_\_\_\_

Effective date confirmation, to be faxed or mailed to Issuer's authorized representative:

Received: \_\_\_\_\_ Effective Start Date: \_\_\_\_\_  
Boston Financial Data Services  
STIF Investor Services

**Debt Service Payment Schedule Form**

NAME OF ISSUER: \_\_\_\_\_

ISSUER NAME	D T D DATE	PAYMENT DATES	ORIGINAL ISSUE \$

OR  
ATTACH AMORTIZATION SCHEDULE FOR EACH DEBT SERVICE PAYMENT