



Office of the City Clerk
P.O. Box 1293
Albuquerque, NM 87103
Phone (505) 924-3650 Fax (505) 924-3660
www.cabq.gov/clerk

MFC Bank Account Confirmation

I _____, Chairperson for _____
a Measure Finance Committee registered in the City of Albuquerque, state:

I have created one **and only one bank account**, as specified below. The bank account is established in the name of the Measure Finance Committee for the purposes outlined in Article XII of the City Charter. All contributions of money received by the Measure Finance Committee will be deposited in the bank account identified below, and all expenditures will be made from the account identified below.

1. The bank account established for the Measure Finance Committee is located at:

Bank Name and Branch: _____

2. That the individuals authorized to sign on to the account are:

Name	Telephone
_____	_____
_____	_____

3. I have appointed _____, as Treasurer of the above Measure Finance Committee, whose contact information is below:

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email Address: _____

I, _____, hereby swear or affirm, under penalty of perjury under the laws of the State of New Mexico, that all the information on the uploaded form and on any attachments is true, correct, and complete.

Chairperson Signature

Date