

# NEW IOLTA ACCOUNT NOTICE

In order to establish a new IOLTA account, the Attorney and a representative of the Financial Institution must complete this form in its entirety and submit it to the Montana Justice Foundation at the address below. This form will be in addition to any forms that the Financial Institution requires the attorney to complete, such as a signature card.

TO BE COMPLETED BY ATTORNEY	
_____	
Attorney Name	Bar Number
_____	
Firm Name	
_____	
Address	
_____	
City, State, Zip	
_____	
Phone Number	Fax Number
_____	
Email Address	

TO BE COMPLETED BY FINANCIAL INSTITUTION	
_____	
Name of Financial Institution	
_____	
Financial Institution Representative	
_____	
Address	
_____	
City, State, Zip	
_____	
Phone Number	Fax Number
_____	
Email Address	

**By completing and submitting this form, the undersigned Attorney acknowledges that:**

- The Attorney has confirmed that the Financial Institution is an “eligible institution” as defined by Rule 1.18 of the Montana Rules of Professional Conduct and is approved by the State Bar of Montana as a depository for lawyer trust accounts;
- The Attorney authorizes the Financial Institution to remit the interest on this account to the Montana Justice Foundation by ACH pre-authorized debit, check, or any other method approved by the Federal Reserve System; and
- The names and bar numbers of all attorneys who will use this account in the ordinary course of their practice are attached.

**By completing and submitting this form, the undersigned representative acknowledges on behalf of the Financial Institution that:**

- The IOLTA account established under this agreement is an FDIC-insured interest-bearing checking or money-market account whose funds are subject to withdrawal upon request as soon as permitted by law;

- The IOLTA account has been established using the **tax identification number of the Montana Justice Foundation (81-0391131)** with interest creditable to the Foundation and NOT to the attorney or firm listed on the account; and
- Effective as of the date below, interest on this account, computed in accordance with the institution's standard accounting practice, will be reported and remitted to the Montana Justice Foundation on a monthly basis using ACH or other electronic transfer. (Institutions with fewer than 10 IOLTA accounts may report and remit quarterly.)

**IOLTA Account Confirmation (to be completed by Financial Institution)**

Account Name: The Montana IOLTA Account of \_\_\_\_\_  
 (Name of Attorney or Firm)

Account Number: \_\_\_\_\_ Routing Number: \_\_\_\_\_

Date Account Opened: \_\_\_\_\_

**Attorney: Please list the names and bar numbers of all other attorneys who will use this account in the course of their practice (attach additional page(s) if needed):**

\_\_\_\_\_  
 (Name)

\_\_\_\_\_  
 (Bar Number)

\_\_\_\_\_  
 (Name)

\_\_\_\_\_  
 (Bar Number)

\_\_\_\_\_  
 (Name)

\_\_\_\_\_  
 (Bar Number)

\_\_\_\_\_  
 (Name)

\_\_\_\_\_  
 (Bar Number)

\_\_\_\_\_  
 (Name)

\_\_\_\_\_  
 (Bar Number)

\_\_\_\_\_  
 (Name)

\_\_\_\_\_  
 (Bar Number)

\_\_\_\_\_  
 Attorney Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Financial Institution Rep. Signature

\_\_\_\_\_  
 Date

**Please mail or email this completed form to the Montana Justice Foundation, PO Box 1917, Helena, MT, 59624, or [mjf@mtjustice.org](mailto:mjf@mtjustice.org). For more information about the IOLTA Program of the Montana Justice Foundation, please visit [www.mtjustice.org/iolta](http://www.mtjustice.org/iolta).**