



SPECIAL ESCROW ACCOUNT

Escrow bank account number

Non-USPS delivery
7273 Linderson Way SW
Tumwater WA 98501

AMENDMENT AGREEMENT

This agreement amends the original escrow agreement between _____,
a self-insured employer, and _____, as escrow agent,
and the Department of Labor and Industries.

The monies or securities in the escrow account have been (increased/decreased) to the revised total of _____. All other terms and provisions of the escrow agreement remain in full force and effect.

The name of the self-insured employer has changed from _____ to _____.

The name of the escrow agent has changed from _____ to _____.

The new escrow account number is _____.

Other change:

Approved this date _____ Self-Insured Representative

Amendment received and accepted this date _____ Escrow Agent (authorized signature)

Approved this date _____ Program Manager for Self-Insurance