



Wyoming Foundation for Civil Justice
PO Box 1594
Cheyenne, WY 82003

WYOMING IOLTA PARTICIPATION FORM FOR ATTORNEYS*

Notice to Wyoming Financial Institutions:

The undersigned elect(s) to participate in the Wyoming Interest on Lawyers Trust Accounts Program (IOLTA) as authorized by the Wyoming Supreme Court. Under this program, interest on the trust account described below will be paid directly to the Equal Justice Wyoming Foundation, the third party beneficiary of the trust account. In compliance with the Wyoming Supreme Court rule 1.15 governing IOLTA, the undersigned authorizes this Financial Institution to release information regarding this IOLTA to the Equal Justice Wyoming Foundation. That information includes: name of the account, account number, amount of interest earned, interest rate, fees or charges assessed against the remittance, and the average account balance for the period of the remittance. The following trust/escrow account is to be established as an IOLTA:

Account name: _____

Account number: _____

The funds in this account should be placed in an interest-bearing NOW account. Interest on the average monthly balance in the account, or as otherwise computed in accordance with your standard accounting practice, should be remitted to the Equal Justice Wyoming Foundation (PO Box 1594, Cheyenne, WY 82003). The Equal Justice Wyoming Foundation's EIN is 27-3029906.

Each remittance must be paid monthly and accompanied by an electronic IOLTA Remittance Report to iolta@equaljusticewyomingfoundation.org. The electronic IOLTA Remittance Report shows the following: the name of the account, account number, amount of interest earned, interest rate, fees or charges assessed against the account, and the average account balance for the period of the remittance. If your institution has trust accounts for more than one attorney or law firm participating in the IOLTA program, you may make a single remittance for all of the lawyer trust accounts.

Authorized Signatory:

Signature

Printed name

Date

Firm/Employer Name

Address

City, State, Zip

**Please submit form to your IOLTA financial institution.*

Updated June 2026