



SIGNATURE CARD AND CERTIFICATE OF RESOLUTION OF MUNICIPAL CORPORATION

Depositor / Account Holder		Business Trade Name (If applicable)			
CITY OF COLUMBIA		SELF INSURANCE ACCOUNT			
Address		City		State	Zip + 4
701 E BROADWAY		COLUMBIA		MO	65201
Account Number	Account Type	Opening Date	Tax ID	Responsible Officer Name & Number	Responsible Cost Center

The undersigned certifies that he/she is the duly elected and qualified Secretary/Assistant Secretary of Depositor, a municipal corporation ("Depositor" refers to both the Depositor and the trade name); that the following is a resolution duly adopted by the governing body of the organization authorized to adopt said resolution, which resolutions are now in full force and effect and shall remain in full force and effect until written notice of their amendment or revocation has been received by Bank and Bank has had a reasonable opportunity to act as provided in Bank's *Deposit Agreement*; and that the specimen signature(s) and facsimile specimen (if applicable) below are true and genuine.

Resolved, that a deposit account ("Account") be opened or maintained with Commerce Bank ("Bank") in the name of Depositor, subject to the terms of Bank's *Deposit Agreement* and other agreements and disclosures related to the Account, as amended from time to time.

Authorized Agent(s)	Title	Signature(s)	Indicate authorization for each Agent by checking the appropriate boxes below			
			Section A	Section B	Section C	Section D
	CITY MANAGER		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	DIRECTOR OF FINANCE		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	ASSISTANT DIRECTOR OF FINANCE		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	TREASURER		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	TREASURY SUPPORT SUPERVISOR		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Facsimile Specimen (If applicable)					

SECTION A – DEPOSITS/WITHDRAWALS/DEBIT CARD

Further resolved, that any one of the agents designated above ("Account Agent") is authorized to sign, or otherwise authorize, checks, drafts and other orders ("Instruments"); and enter into agreements with Bank for debit cards, all for the payment of money from the Account; and to endorse Instruments, for credit or negotiation, payable to Depositor. Bank is authorized to pay, without further inquiry, all Instruments signed in accordance with this resolution against the Account whether such items are drawn or endorsed to the drawer, tendered for cash or for payment of the individual obligation of drawer, or are deposited to the individual credit of the drawer. Bank shall not have any obligation to inquire as to the circumstances of the issuance or use of any Instrument or debit card or the application of the proceeds of the Instrument or debit card. Endorsements for credit may be made by the written or stamped endorsement of Depositor, without designation of the person making the stamped endorsement. Bank is authorized to pay any Instruments drawn on the Account that bear or purport to bear the facsimile, electronic or imaged signature, mark or symbol of any Account Agent or Depositor (together referred to as "Facsimile") if such Facsimile resembles the Facsimile on file with Bank or if such Facsimile resembles any Facsimile previously affixed to any Instrument drawn on the Account which was accepted and paid without timely objection by Depositor, thereby ratifying its use.

SECTION B - FUND TRANSFERS/WIRES/ACH

Further resolved, that any one of the agents designated above ("Fund Transfer Agent") is authorized to make or verify written, telephonic or verbal requests for the transfer of funds, including wire transfers and ACH debits, from the Account to other accounts of the Depositor or to third parties; to enter into agreements with Bank providing for such fund transfers; and to designate other Fund Transfer Agents. Bank is authorized to honor all such fund transfers when given or purported to be given by any Fund Transfer Agent.

SECTION C - SECURITIES/INVESTMENTS

Further resolved, that any one of the agents designated above ("Investment Agent") is authorized to buy, sell, assign, transfer and/or deliver any and all stocks, bonds or other securities now owned or hereafter acquired and registered in the name of Depositor or its nominee(s). Any Investment Agent is authorized to enter into any agreements with Bank relating to securities or investments, including, but not limited to, safekeeping agreements and repurchase agreements. Any Investment Agent is authorized to give Bank instructions required to buy, sell or otherwise deal in securities; to receive, withdraw, receipt for and direct the disposition of money, securities and property of every kind held in safekeeping with Bank; and to receive any communications from Bank and to sign any documents relating to securities or investment transactions.

SECTION D - TREASURY SERVICES/ELECTRONIC BANKING

Further resolved, that any one of the agents designated above ("Treasury Services Agent") is authorized to identify and implement cash management and other general banking services, including but not limited to, electronic or online banking services, for Depositor and to enter into agreements with Bank relating to such services.

Small Business Online Banking Administrator (if applicable):	(Please Print – if inapplicable, mark "N/A")	Further resolved, that, subject to the Small Business Online Banking Statement of Understanding (which the person(s) signing this Certificate of Resolution below acknowledges receipt thereof and that he or she has read and which is incorporated herein by reference), the Online Banking Administrator designated and authorized herein may enroll the Depositor in Online Banking.
	N/A	

ELECTRONIC RECORDS. Further resolved, that this Certificate of Resolution and all paper records related to the Account with which this document is a part and whether or not the paper records were submitted in advance of, contemporaneously with or subsequent to, the execution of this document may, at the option of Bank, be converted by any digital or electronic method or process to an electronic record or subsequently further converted or migrated to another electronic record format or electronic storage medium. Upon conversion to an electronic record as authorized herein, such electronic record shall be the record of the actions as described herein and the electronic record shall have the same legal force and effect as the paper documents from which it was converted. Depositor waives any legal requirement that any documents digitally or electronically converted be embodied, stored, or reproduced in a tangible media. Depositor further agrees that a printed or digitally reproduced copy of the electronic record shall be given the same legal force and effect as a signed writing. In addition, Depositor authorizes and agrees to destruction of the paper documents by Bank upon conversion of the paper documents to a digital or electronic record.

In Witness Whereof, I have signed my name and affixed the seal of the corporation (if applicable) as of the date written below.

Signature of Corporate Secretary / Assistant Secretary/City Clerk

DATE

City Clerk



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			Section A	Section B	Section C	Section D
	RISK MANAGER		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	AUTHORIZED REP, TPA		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	AUTHORIZED REP, TPA		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	AUTHORIZED REP, TPA		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Small Business Online Banking Administrator (if applicable):	(Please Print – If inapplicable, mark "N/A")	Further resolved, that, subject to the Small Business Online Banking Statement of Understanding (which the person(s) signing this Certificate of Resolution below acknowledges receipt thereof and that he or she has read and which is incorporated herein by reference), the Online Banking Administrator designated and authorized herein may enroll the Depositor in Online Banking.
	N/A	

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