

# **Master Services Agreement 1**

### Contract Signer(s) Change

Customer Infor	nation			
Customer Name:	CITY OF COLU	JMBIA MISSOURI		Contract Signer Changes Related to t Original MSA Dated: 09/04/2013
- Tax Identification Nu	mber on Curre	ent MSA		
has full power and la persons named, and The unders and now hold the off	wful authority that the unde igned Contractices of Custon	to make this change to the Contr rsigned Contract Signer has full p t Signer further certifies that the	act Signer(s) and to confer power and authority to exer newly appointed Contract S	ner's books and records, Customer rethe powers herein granted to the rcise the same.  Signers have been duly elected to appearing opposite their names
Add Contract S	igner (s)			
Print Contract Sign	er Name	Print Contract Signer Title	Contrac	t Signer Signature
			-	
Delete Contract	Signer (s)			
		s) other than those new Cures are needed)	ontract Signers liste	ed above (list name(s)
cmy, no opean				
Contract Signer				
Signature				Date:
Print Name: Print Title:				
riint ride:				CTN:
For Internal Use Only				



Rev. 11/08/2011

# Appendix B-1

### Change in Authorized Treasury Management Signer(s)

Customer Name: CITY OF COLUMBIA MIS	Nila	ntification ::
Authorized Treasury Managemen	t Signers:	
Add Authorized Treasury Management S	igner(s):	
Name	Title	Specimen Signature
		2
	-	
<u> </u>		
	140-	
Delete Authorized Treasury Management	t Signer(s) (list name(s) only):	
**************************************	- Standard Roberts December 1997	
3-		
ixisting Authorized Treasury Manageme	ant Signor(s) other than those new Aut	horized Treasury Management signers
isted above (list name(s) only, no specir		management signere
The Contract Signer listed below further	represents and warrants to the Bank thorized Treasury Management Signer(	that the signatures listed above are the
rue and authentic signatures of the Auti	uments to appoint the Authorized Tre	asury Management Signer(s). This
ction required by its organizational doc oppendix B-1 becomes effective only aft	ter U.S. Bank receives and has time to	modify its records to reflect the
ction required by its organizational doc ppendix B-1 becomes effective only aft hanges noted herein.	ter U.S. Bank receives and has time to	modify its records to reflect the
ction required by its organizational doc appendix B-1 becomes effective only aft hanges noted herein.  Contract Signer Signature:	er U.S. Bank receives and has time to  Print Title:  Date:	modify its records to reflect the
ction required by its organizational doc appendix B-1 becomes effective only aft hanges noted herein.	ter U.S. Bank receives and has time to	modify its records to reflect the
ction required by its organizational doc ppendix B-1 becomes effective only aft hanges noted herein.	Print Title:  Date:	modify its records to reflect the

All of serving you

Appendix B-1 Version: 1/11



Customer Information		
Customer Name: CITY OF COLUMBIA, MISSOURI		New Account
Tax Identification Number:	$\boxtimes$	Change in Authorized Account Signers
Account Information		
Account Name	Account Nun	nber Tax Identification Number
CITY OF COLUMBIA, MISSOURI PAYROLL ACCOUNT		
CITY OF COLUMBIA, MISSOURI POOL ACCOUNT		
Authorized Account Signers		
Add Authorized Account Signer(s):  Name  Title		Specimen Signature
Delete Authorized Account Signer(s) (list name(s) only):		
Existing Authorized Account Signer(s) other than those new Anname(s) only, no specimen signatures are needed)	uthorized Acco	ount Signers listed above (list
The Signer listed below further represents and warrants to the authentic signatures of the additional Authorized Account Signaction required by its respective organizational documents to a to delete any Existing Authorized Signer(s); and (iii) he/she is a Customer listed above.	ner(s); (ii) that e appoint the add	each Customer listed above has taken all litional Authorized Account Signer(s) and
Account Signer may execute this Appendix A-1 to add an accoremain the same. Otherwise, this Appendix A-1 must be executeffective only after U.S. Bank receives and has time to modify it	ted by a Contra	act Signer. This Appendix A-1 becomes
Signer Signature:	Print Title:	
Print Name:	Date:	
For Internal Use Only: Authorized Signers are related to the Master Services Agreement da	ted:	
Review Validation Method T	L Review	Imaged



Customer Information		
Customer Name: CITY OF COLUMBIA, MISSOURI		New Account
Tax Identification Number:		Change in Authorized Account Signers
Account Information		
Account Name	Account Num	nber Tax Identification Number
CITY OF COLUMBIA, MISSOURI CREDIT CARD ACCOUNT		
CITY OF COLUMBIA, MISSOURI WEB/PHONE ACCOUNT		
Authorized Account Signers		
Add Authorized Account Signer(s):  Name  Title		Specimen Signature
Delete Authorized Account Signer(s) (list name(s) only):		
Existing Authorized Account Signer(s) other than those new A name(s) only, no specimen signatures are needed)	Authorized Acco	ount Signers listed above (list
The Signer listed below further represents and warrants to the authentic signatures of the additional Authorized Account Sig action required by its respective organizational documents to to delete any Existing Authorized Signer(s); and (iii) he/she is Customer listed above.	ner(s); (ii) that e appoint the add	each Customer listed above has taken all litional Authorized Account Signer(s) and
Account Signer may execute this Appendix A-1 to add an accoremain the same. Otherwise, this Appendix A-1 must be executeffective only after U.S. Bank receives and has time to modify	uted by a Contra	act Signer. This Appendix A-1 becomes
Signer Signature:	Print Title:	
Print Name:	Date:	
For Internal Use Only: Authorized Signers are related to the Master Services Agreement days	ated:	
Review Validation Method	TL Review	lmaged



Customer Information		
Customer Name: CITY OF COLUMBIA, MISSOURI	☐ New Account	
Tax Identification Number:		horized Account Signers
Account Information		
Account Name	Account Number Tax	didentification Number
CITY OF COLUMBIA, MISSOURI SELF INSURANCE ACCOUNT		
Authorized Account Signers		
Add Authorized Account Signer(s):  Name  Tit	Spe	ecimen Signature
Delete Authorized Account Signer(s) (list name(s) only):		
Existing Authorized Account Signer(s) other than those new name(s) only, no specimen signatures are needed)	Authorized Account Signers list	ed above (list
The Signer listed below further represents and warrants to authentic signatures of the additional Authorized Account 3 action required by its respective organizational documents to delete any Existing Authorized Signer(s); and (iii) he/she Customer listed above.	igner(s); (ii) that each Customer o appoint the additional Authoriz s authorized to complete this Ap	listed above has taken all zed Account Signer(s) and pendix A-1 for each
Account Signer may execute this Appendix A-1 to add an a remain the same. Otherwise, this Appendix A-1 must be ex effective only after U.S. Bank receives and has time to mod	cuted by a Contract Signer. This	Appendix A-1 becomes
Signer Signature:	Print Title:	
Print Name:	Date:	
For Internal Use Only: Authorized Signers are related to the Master Services Agreemen	dated:	_
Review Validation Method	TL Review In	naged



Customer Information		
Customer Name: CITY OF COLUMBIA, MISSOURI		New Account
Tax Identification Number:		Change in Authorized Account Signers
Account Information		
Account Name	Account Nun	nber Tax Identification Number
CITY OF COLUMBIA, MISSOURI ACCOUNTS PAYABLE ACCOUNT		
Authorized Account Signers  Add Authorized Account Signer(s):		
Name Title	)	Specimen Signature
Delete Authorized Account Signer(s) (list name(s) only):		
Existing Authorized Account Signer(s) other than those new name(s) only, no specimen signatures are needed)	Authorized Acco	ount Signers listed above (list
The Signer listed below further represents and warrants to the authentic signatures of the additional Authorized Account Signation required by its respective organizational documents to delete any Existing Authorized Signer(s); and (iii) he/she is Customer listed above.	igner(s); (ii) that e to appoint the add s authorized to co	each Customer listed above has taken all ditional Authorized Account Signer(s) and complete this Appendix A-1 for each
Account Signer may execute this Appendix A-1 to add an ac remain the same. Otherwise, this Appendix A-1 must be exe effective only after U.S. Bank receives and has time to modif	cuted by a Contra	act Signer. This Appendix A-1 becomes
Signer Signature:	Print Title:	
Print Name:	Date:	
For Internal Use Only: Authorized Signers are related to the Master Services Agreement	dated:	
ReviewValidation Method	TL Review	Imaged