

CITY OF MIAMI SPRINGS



Purchasing Department
201 Westward Drive
Miami Springs, FL 33166-5289
Phone: (305)805-5035
Fax: (305)805-5040
romerot@miamisprings-fl.gov

Tammy Romero
Procurement Specialist

LEGAL NOTICE

REQUEST FOR PROPOSAL # 05-15/16

BANKING SERVICES

Sealed proposals for the **BANKING SERVICES**, MIAMI SPRINGS, FL will be received until **2:30 P.M. on Wednesday, June 22nd, 2016**, via the City Clerk, on the 2nd floor, Miami Springs City Hall, 201 Westward Drive, Miami Springs, Florida 33166.

Request for Proposal will then be transferred to the Council Chambers. At time, date, and place noted above, proposals will be publicly opened. Any proposals received after time and date specified will not be considered and returned to the proposer unopened.

A **Mandatory Pre-Bid Conference** will be held at **9:30 AM** on the **9th day of June 2016** at Miami Springs City of Miami Springs, Council Chambers, 2nd floor, 201 Westward Drive, Miami Springs, Fl. 33166.

Deadline to request any additional information/clarification will be Friday, June 10th, 2016.

This Request for Proposal (RFP) is available upon written request to Tammy Romero at romerot@miamisprings-fl.gov. All requests must be accompanied by name, address, phone and fax number.

The City of Miami Springs reserves the right at any time to modify, waive, or otherwise vary the terms and conditions of this Request for Proposal including, but not limited to, the deadlines for submission, the submission requirements and the Scope of Work. The City further reserves the right to reject any or all submittals, to cancel or withdraw this Request for Proposals at any time. The Proposer, who is otherwise competent, and submits the lowest responsive and responsible Response, shall, subject to the conditions, limitations and restrictions previously set forth herein, be awarded the Request for Proposal, subject to the negotiation of a mutually acceptable Contract with the City.

City of Miami Springs

GENERAL CONDITIONS AND INSTRUCTIONS

ACCEPTANCE OR REJECTION OF PROPOSALS

The City of Miami Springs reserves the right to waive irregularities or technicalities in proposals or to reject all proposals or any part of any proposal.

ADDITIONAL INFORMATION

Each proposer shall examine all parts of the Invitation to Proposal documents and shall judge all matters relating to the adequacy and accuracy of such documents. The City of Miami Springs shall not be responsible for oral interpretations given by any city employee, representative, or others. No plea of ignorance, by the proposer, of conditions that exist or that may hereafter exist as a result of failure or omission on the part of the proposer to make the necessary examinations and investigations, or failure to fulfill in every detail the requirements of the contract documents, will be accepted as a basis for varying the requirements of the City of Miami Springs or the compensation to the proposer. Any inquiries, suggestions or requests concerning interpretation, clarification or additional information pertaining to these specifications should be submitted to:

Tammy Romero
201 Westward Drive
Miami Springs, FL 33166-5259
Telephone: (305) 805-5035
Facsimile: (305) 805-5040

The proposal title and number should be referenced on all correspondence. Should any questions or responses require revisions to the specifications as originally published, such revisions will be by formal amendment only.

The issuance of a written amendment is the only official method whereby interpretation, clarification or addition information will be given. If any amendments are issued to this Request for proposal, the City will attempt to notify all prospective proposers who have secured same; however, it shall be the responsibility of each proposer, prior to submitting their proposal, to contact the City of Miami Springs to determine if an amendment was issued and make such amendment a part of their proposal.

PROPOSAL SUBMISSION One (1) original and one (1) electronic copy on CD or USB of this entire document as well as any other pertinent documents should be returned in order for the proposal to be considered for award. Proposals shall be submitted to the Purchasing Agent properly signed in ink, notarized, and submitted in a sealed envelope on which shall be shown the name of the proposer, opening date, and name and proposal number of the proposal.

By submitting a proposal, the proposer declares that he understands and agrees that this proposal, specifications, provisions, terms and conditions of same, shall become a valid contract between the City of Miami Springs and the undersigned upon notice of award of contract in writing and/or issuance of Purchase Order by the City of Miami Springs.

ASSIGNMENT The successful proposer(s) shall not assign, transfer, convey, sublet or otherwise dispose of this contract, or of any or all of its right, title or interest therein, or his or its power to execute such contract to any person, company or corporation without prior written consent of the City.

PROPOSER CERTIFICATION Submission of a signed proposal is proposer's certification that the proposer will accept any awards made to him as a result of said submission at the prices and terms contained therein.

PROPOSAL TABULATIONS Proposers desiring a copy of the proposal tabulation may request same by enclosing a self-addressed stamped envelope with their proposal.

PROPOSAL WITHDRAWAL No proposal can be withdrawn after it is filed unless the proposer makes his request in writing to the City prior to the time set for the opening of proposals, or unless the City fails to accept it within ninety (90) days after the date fixed for opening proposals.

PROPOSER RESPONSIBILITY Before submitting the proposal, each proposer shall make all investigations and examinations necessary to ascertain all conditions and requirements affecting the full performance of the contract, and to verify any representations made

by the City that the proposer will rely upon. No pleas of ignorance of such conditions and requirements resulting from failure to make such investigations and examinations will relieve the successful proposer from his obligation to comply in every detail with all provisions and requirements of the contract documents.

DEFAULT Failure or refusal of a proposer to execute a contract upon award, or withdrawal of a proposal before such award is made, may result in forfeiture of that portion of any proposal surety required equal to liquidated damages incurred by the City. Where surety is not required, failure to execute a contract as described above may be grounds for removing the proposer from the proposer's list.

DELIVERY All service, materials, and/or equipment are purchased F.O.B. point of delivery in Miami Springs. The successful proposer must prepay all transportation charges to designated point of delivery in Miami Springs. Collect or Freight Due shipments will be refused.

EXCEPTIONS TO SPECIFICATIONS Proposers taking exception to any part or section of these specifications shall indicate such exceptions on their proposal and prove to the satisfaction of the City that said item is equal to, or better than, the product specified. Proposals for alternate items shall be stated in the appropriate brand on the proposal form, or if the proposal form does not contain blanks for alternates, proposer **MUST** attach to the specification documents on Company letterhead a statement identifying, but not limited to, the manufacturer, brand name, make, model and/or Catalog Number(s) of each proposed alternate, plus a complete description of the alternate items including illustrations, performance test data and any other information necessary for an evaluation. The proposer must indicate any variances to the specification document no matter how insignificant.

The City of Miami Springs reserves the right to approve as an equal, or to reject as not being an equal, any

article the proposer proposes to furnish which contains major or minor variations from specification requirements but which may comply substantially therewith. Failure to indicate any exceptions shall be interpreted as the proposer's intent to fully comply with the specifications as written.

Notwithstanding the foregoing, the City reserves the right to prohibit, in advance, any consideration of "or equal" submittals prior to the dissemination of any RFP specifications.

Proposers **MUST** submit any cost-saving/value-added alternate proposal pricing suggestions, such as rebates, creative lease agreements, extended warranty periods, trade-in allowances, or the availability of discounts for floor model or demonstrator units at significant savings. Any alternate pricing should be noted as a separate line that may be subtracted from the proposal pricing as specified, allowing for clear evaluation and value-analysis by the City.

EXPENSES INCURRED IN PREPARING PROPOSAL The City accepts no responsibility for any expenses incurred in the proposal's preparation, and presentation; such expenses are to be borne exclusively by the proposer.

INDEMNIFICATION The Contractor shall indemnify and save harmless forever the City, and all the City's agents, officers and employees from and against all charges or claims resulting from any bodily injury, loss of life, or damage to property from any act, omission or neglect, by Proposer or its employees; the Contractor shall become defendant in every suit brought for any of such causes of action against the City or the City's Officials, agents and employees; the Contractor shall further indemnify City as to all costs, attorney's fees, expenses and liabilities incurred in the defense of any such claims and any resulting investigation.

INSURANCE Proposer, shall furnish evidence of insurance to the Procurement and Purchasing Department. Submitted evidence of coverage shall demonstrate strict compliance to all requirements.

The City of Miami Springs shall be listed as an "Additional Insured". Issuance of a purchase order is contingent upon the proper insurance documents. All insurance shall be maintained until work has been completed and accepted by the City.

General Liability: \$1,000,000 combined single limit per occurrence for bodily injury, personal injury, and property damage. If Commercial General Liability Insurance or other form where a general aggregate limit is used, either the general aggregate limit shall apply separately to this project/location or the general aggregate limit shall be twice the required occurrence limit.

Automobile Liability Insurance - covering all owned, non-owned and hired vehicles used in connection with the work, in an amount not less than \$500,000 per occurrence for Bodily Injury and Property Damage combined.

Worker's Compensation Insurance - as required by Chapter 440, Florida Statutes.

All insurance policies required above shall be issued by companies authorized to do business under the laws of the State of Florida, with the following qualifications as to management and financial strength. The company must be rated no less than "B" as to management and no less than Class "V" as to financial strength, by the latest edition of Best's Insurance Guide, published by A.M. Best Company, Oldwick, New Jersey, or its equivalent, subject to the approval of the Finance Director.

Certificates of Insurance acceptable to the City shall be filed with the City prior to the commencement of the work. These policies described above, and any certificates shall specifically name the City of Miami Springs as an additional Insured and shall contain a provision that coverage afforded under the policies will not be canceled until at least thirty (30) days prior to written notice has been given to the City of Miami Springs.

Contractors shall include all subcontractors as insured under its

policies or shall furnish separate certificates and endorsements for each subcontractor. All coverage's for subcontractors shall be subject to all of the requirements stated herein.

Cancellation clauses for each policy should read as follows: Should any of the above described policies be canceled before the expiration date thereof, the issuing company will mail thirty (30) days written notice to the Certificate Holder named herein.

INSPECTION All articles, materials, and supplies purchased are subject to inspection on arrival at destination. The City of Miami Springs reserves the right to return for full credit at the risk and expense of the successful proposer, all or part of the articles, materials, or supplies furnished contrary to specifications and instructions.

LATE PROPOSAL REJECTION The City of Miami Springs is not responsible for the delivery of any proposal. All proposals received by the Purchasing Agent after the time stated in the Request for proposal, shall be returned unopened and will not be considered for award.

LAWS AND REGULATIONS It shall be understood and agreed that any and all services, materials and equipment shall comply fully with all Local, State and Federal laws and regulations. Lack of knowledge by the proposer will in no way be a cause for relief from responsibility. Non-compliance with all federal state and local orders and laws may be considered grounds for termination of contract(s).

LICENSES AND REGISTRATIONS The contractor shall be responsible for obtaining and maintaining any licenses required pursuant to the laws of Dade County, the City of Miami Springs, or the State of Florida. Every vendor submitting a proposal on this request for proposal should include a copy of the company's occupational license or a written statement on letterhead indicating the reason no license exists. Miami Springs, Florida-based businesses

are required to purchase an Occupational License to conduct business within the City. Vendors residing or based in another state or municipality, but maintaining a physical business facility or representative in Miami Springs, may also be required to obtain such a license by their own local government entity or by Miami Springs. For information specific to Miami Springs occupational licenses call (305) 805-5030.

METHOD OF AWARD The City of Miami Springs reserves the right to make the award on a total or package basis or on a unit basis, whichever is deemed in the best interests of the City.

METHOD OF PAYMENT The City has implemented a purchasing card program through Sun Trust Bank, using the VISA network. Contractors with purchasing card capability will receive payment from the VISA purchasing card in the same manner as other Visa purchases. Accordingly, respondents with present purchasing card capability should have the ability to accept VISA or take whatever steps are necessary to implement such capability before the start of the agreement term. The City can only accept VISA, however, the purchasing card is not the exclusive method of payment. Please indicate your ability to accept Visa purchasing card on Proposal Form.

PATENTS AND ROYALTIES The proposer, without exception, shall indemnify and save harmless the City of Miami Springs, Florida and its employees from liability of any nature or kind, including cost and expenses for, or on account of, any copyrighted, patented, or unpatented invention, process, or article manufactured or used in the performance of the contract, including its use by the City of Miami Springs, Florida. If the proposer uses any design, device or materials covered by letters, patent, or copyright, it is agreed that the proposal prices shall include all royalties or cost arising from the use of such design, device, or materials in any way involved in the work.

QUALIFICATION OF PROPOSERS Each proposer may be required, before the

award of any contract, to show to the complete satisfaction of the City of Miami Springs that he has the necessary facilities, ability, and financial resources, to furnish the service/product as specified herein in a satisfactory manner, and he may also be required to show past history and reference which will enable the City to satisfy itself as to the proposer's qualifications. Failure to qualify according to the foregoing requirements may justify the City in rejecting his proposal.

PUBLIC ENTITY CRIMES A person or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not submit a proposal on a contract to provide any goods or services to a public entity, may not submit a proposal on a contract with a public entity for the construction or repair of a public building or public work, may not submit proposals on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in Section 287.017, for CATEGORY TWO for a period of 36 months from the date of being placed on the convicted vendor list.

RELATION OF CITY It is the intent of the parties hereto that the successful proposer shall be legally considered as an independent contractor and that neither he nor his employees shall, under any circumstances, be considered servants or agents of the City, and that the City shall be at no time legally responsible for any negligence on the part of said successful proposer, his servants or agents, resulting in either bodily or personal injury or property damage to any individual, firm, or corporation.

TAXES The City of Miami Springs is exempt from Federal Excise and State of Florida Sales Tax. State Sales Tax and Use Tax Certificate Number is 23-11-324901-54C

TERM CONTRACTS The City's Fiscal year begins October 1 and ends September 30 of the following calendar year. When a Contract's term extends beyond the fiscal year in which the Contract commences, the City will issue a Purchase Order to cover its needs for the balance of that fiscal year. At the beginning of each fiscal year thereafter, a purchase order will be issued to correspond with that year. In the final year of the contract, a purchase order will be issued for the remaining months of the contract. Issuance of a new purchase order shall be subject to the availability of budgeted funds. If funds are not appropriated for continuance of a term contract to completion, cancellation may be effected upon thirty (30) days notice.

WARRANTY All material herein specified shall be fully guaranteed by the proposer against factory defects. Any defects which may occur as the result of either faulty material or workmanship within the period of the manufacturer's standard warranty will be corrected by the proposer at no expense to the City of Miami Springs.



City of Miami Springs
 201 Westward Drive
 Miami Springs, Florida 33166-5259

**REQUEST FOR PROPOSAL # 05-15/16
 BANKING SERVICES**

Proposals to be opened in the Council Chambers, 201 Westward Dr., Miami Springs, FL
 33166
 at 2:30 P.M. on June 22nd, 2016

Vendor Name:	Federal Identification or Social Security Number:
Vendor Mailing Address:	Payment Terms: Bi-Weekly
	The City of Miami Springs' faster and preferred method of payment is by way of Visa (P-card). Do you accept this form of payment: Yes <input type="checkbox"/> No <input type="checkbox"/>
City - State - Zip Code:	Delivery in Days After Receipt of Purchase Order:
(Area Code) Telephone Number:	(Area Code) Facsimile Number:
E-Mail Address:	Initial appropriate box to acknowledge amendment(s), if necessary. <div style="display: flex; justify-content: space-around; align-items: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> Amendment #1 Amendment #2 Amendment #3
<p>I certify that this proposal is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting a proposal for the same materials, supplies, or equipment, and is in all respects fair and without collusion or fraud. I agree to abide by all conditions of this proposal and certify that I am authorized to sign for, and commit, the vendor.</p>	<hr/> Authorized Signature (Manual) <hr/> Authorized Signature (Typed or Printed Title)
STATE OF: _____ COUNTY OF: _____ BEFORE ME, the undersigned authority, this document was acknowledged by _____ who: <input type="checkbox"/> is personally known to me, or <input type="checkbox"/> produced identification _____ who, after being duly sworn by me, states that he/she has executed this document for the purposes herein expressed. SWORN TO AND SUBSCRIBED before me this ____ day of _____, 2016. MY COMMISSION EXPIRES: _____ <div style="text-align: center;"> _____ NOTARY PUBLIC, State of Florida At Large _____ Printed Name </div>	

STATEMENT OF NO RESPONSE

Some recipients of this solicitation may elect not to respond for a variety of reasons. The City of Miami Springs is very interested in learning whether certain conditions exist with our solicitation process which may discourage responses. Accordingly, if you elect not to respond with an offer to this solicitation, we ask that you indicate the reason below and either fax this form to 305-805-5040 or mail the form to:

City of Miami Springs
Finance Department
201 Westward Drive
Miami Springs, FL 33166-5259

- We do not offer this product/service or an equivalent.
- Our schedule would not permit us to perform
- Insufficient time to respond to solicitation.
- Unable to meet specifications.
- Specifications not clear.
- Unable to meet bond and/or insurance requirements.
- Solicitation addressed incorrectly.
- Specifications "too tight"
(i.e. geared to specific brand or manufacturer).

If an explanation is appropriate, you may include it below or in an attached letter.

Due to the large number of companies listed on the City's vendor list and the cost of mailing, it is necessary to delete the names of persons or businesses who fail to respond to three (3) consecutive solicitations without giving a reason or requesting retention on our vendor list.

Do you desire future solicitations? Yes No

Name: _____ Title: _____

Company: _____

Address: _____

Telephone: _____ Fax: _____

CONTRACTOR'S QUESTIONNAIRE

Name of Bank: _____

Principal Officer: _____

Address: _____

Years in Business under Present Name: _____

List other types of services your bank engages in:

Include copies of licenses and certificates with proposal.

Demonstrate your capacity to perform banking of this magnitude by indicating four (4) municipalities in which you have done business with within the past two (2) years that are equal to or greater in scope.

Municipality:	Contact Name:	
Banking Amount:	Phone #	Fax #
Email:		

Municipality:	Contact Name:	
Banking Amount:	Phone #	Fax #
Email:		

Municipality:	Contact Name:	
Banking Amount:	Phone #	Fax #
Email:		

Municipality:	Contact Name:	
Banking Amount:	Phone #	Fax #
Email:		

SPECIAL CONDITIONS

SCOPE The intent of these specifications is to set forth and convey to prospective proposers the **BANKING SERVICES** as desired by the City of Miami Springs.

TERM OF CONTRACT This contract will be in effect for a one (1) year period effective from date of award and the prices quoted hereunder shall be firm to the City of Miami Springs for the duration of the contract. Prior to, or upon completion, of that initial term, the City of Miami Springs shall have the option to renew this contract for an additional four (4) one (1) year periods on a year-to-year basis. The renewals are contingent upon satisfactory performance by the contractor and availability of funds.

Indicate your acceptance or rejection of the City's renewal options by initialing the appropriate box and providing the amounts of fees quoted for each option year below.

Accept	Reject
--------	--------

Option Year #1 _____

Option Year #2 _____

Option Year #3 _____

Option Year #4 _____

TERMINATION OF CONTRACT The City of Miami Springs reserves the right to terminate this contract if the successful proposer fails to perform satisfactorily in all areas of service, availability, delivery, quality and any other area covered by these specifications. In the event of such cancellation, the City additionally reserves the right to make the award for the balance of the contract period to the next higher proposer.

FAILURE TO COMPLY Any failure on the part of a responder to provide the documentation set forth in the proposal specifications could, in and of itself, constitute a determination that the proposal is non-responsive and therefore disqualified.

PROPOSERS STANDARD CHECKLIST:

Did you remember to include/complete the following?

- _____ 1 Original and 1 electronic copy on CD or USB of proposal submittal
- _____ Copy of current licenses/ Occupational Licenses
- _____ Acknowledgment of receipt of each addendum issued by CITY OF MIAMI SPRINGS (Page 7)
- _____ Statement of No Response (if applicable)
- _____ Contractor's Questionnaire (Page 9)
- _____ Special Conditions (Accept/Reject) (Page 10)
- _____ RFP Information Form (Page 25)
- _____ Certificate of Authority (Pages 26, 27, 28, or 29)
- _____ No Conflict of Interest, Non-Collusion Certification (Page 30)
- _____ Proposer's Qualification Statement (Page 31)
- _____ Debarment and Suspension Certificate (Page 32)
- _____ Indemnification and Hold Harmless (Page 33)
- _____ Price Proposal Schedule (Pgs. 34-37)
- _____ Completion of Vendor Application
- _____ Complete Proposal, including all required documentation

Although the foregoing is intended to provide a complete list of all proposal requirements and submittals, the City's failure to include any proposal requirements or submittals therein, shall not constitute a waiver of any RFP requirements for any proposer.

GENERAL DESCRIPTION & SUPPLEMENTARY CONDITIONS

A. Purpose

The City of Miami Springs is currently soliciting competitively bid sealed proposals from experienced and qualified financial institutions located in and/or within 3 miles of any of the territorial boundaries of the City to provide full banking and investment services.

The objectives are to:

- A. Obtain the best most efficient banking services while minimizing costs
- B. Maximizing return on investments
- C. Preserve capital
- D. Avoid unreasonable risks and
- E. Readily provide availability to the funds.

This Request for Proposal may or may not result in an award of more than one agreement. The City reserves the right, to establish other banking services and receive the same or different services from other financial institutions as deemed necessary to the City. The City reserves the right and flexibility to pull out services listed in this RFP and issue separate contracts at any time.

B. Brief Background

The City of Miami Springs annual expenditures exceed \$19 million, including payroll for approximately 230 employees (during peak seasons including F/T and P/T). Interest earned on investments is a source of non-ad valorem revenue to the City.

Major revenue sources from the City come from: property (sales and franchise taxes); utility taxes, communications service taxes; investment incomes; parking and traffic tickets; business licenses; building permits; rental revenues and public utility charges for services.

On a monthly basis, approximately 442 items are deposited and 573 checks are disbursed, with over 1366 ACH Transmissions. Daily deposits are currently delivered one time a day by a City of Miami Springs Certified Police Officer.

The CITY OF MIAMI SPRINGS currently maintains (5) accounts: General Operating Account, Law Enforcement Trust Fund (LETF), Payroll, Golf, and Money Market.

C. General Requirements

1. **Proposer's Responsibility:** Before submitting the proposal, each proposer shall make all investigations and examinations necessary to ascertain all conditions and requirements affecting the full performance of the contract, and to verify any representations made by the City that the proposer will rely upon. No pleas of ignorance of such conditions and requirements resulting from failure to make such investigations and examinations will relieve the successful proposer from his obligation to

comply in every detail with all provisions and requirements of the contract documents.

2. The Request for Proposal (RFP) is available upon written request to Tammy at romerot@miamisprings-fl.gov.

All inquiries, suggestions or requests concerning interpretation, clarification or additional information pertaining to these specifications should be submitted to:

Tammy Romero, Procurement Services Manager
201 Westward Drive
Miami Springs, FL 33166-5259
Telephone: (305) 805-5035
Facsimile: (305) 805-5040

3. **Addenda:** The proposal title and number should be referenced on all correspondence. Should any questions or responses require revisions to the specifications as originally published, such revisions will be by formal amendment only.

The issuance of a written amendment is the only official method whereby interpretation, clarification or addition information will be given. If any amendments are issued to this Request for Proposal, the City will attempt to notify all prospective proposers who have secured same; however, it shall be the responsibility of each proposer, prior to submitting their proposal, to contact the City of Miami Springs to determine if an amendment was issued and make such amendment a part of their proposal.

4. **Bid Submission:** One (1) original and one (1) electronic copy (USB or CD acceptable) of this entire document as well as all other pertinent documents must be returned in order for the Proposal to be considered for award. Proposals shall be submitted, signed in ink, notarized, and submitted in a sealed envelope; identifying the name of the Proposer, Proposal opening date, project name and proposal number to:

City Clerk, City Hall
2nd floor
201 Westward Drive
Miami Springs, FL 33166-5259

5. Proposals must include a brief introduction, background and work description objective (See Section "G. CONTENTS OF QUALIFICATION STATEMENT")

6. **Projected Proposal Timeline- (Dates are subject to change).**

Advertise Proposal	June 2nd, 2016
Pre-Bid Meeting	June 9th, 2016
Clarification deadline	June 10th, 2016
Amendment (pending complexity)	June 13th, 2016
Bid Opening	June 22nd, 2016
Recommendation of Award to City Manager and Council	June 27th, 2016

7. Upon award all correspondence must be put in writing for the CITY OF MIAMI SPRINGS' response to:

William Alonso, Finance Director
 City of Miami Springs
 201 Westward Drive
 Miami Springs, FL 33166-5259

D. MINIMUM QUALIFICATIONS/ REQUIREMENTS

1. Must be a member of the Federal Reserve System.
2. Must be a qualified public depository, as designated by the Office of the State of (Florida) Treasurer and as required by the Florida Security for Public Deposits Act, Chapter 280, Florida Statutes, whose deposits are insured by the Federal Deposit Insurance Corporation ("FDIC").
3. **Must have banking branch(es) located within 3 miles of any part of the territorial boundaries of the City of Miami Springs, Florida.** Provide a list of office/branches within these limits, including hours of operation.
4. Have, as a minimum, "Satisfactory" compliance for the most recent completed Community Reinvestment Act (CRA) evaluation report. **Submit copy of report showing the aforementioned (web links are acceptable).**
5. Proposals should include one (1) set of financial statements for the past two (2) years including an auditor's unqualified opinion and appropriate notes to financial statements.
6. The bank is requested to provide a copy of its Wire Transfer Agreement with its proposal and if the agreement is not negotiable, it should be noted.

E. SCOPE OF SERVICES

1. Intended Account Structure

CITY OF MIAMI SPRINGS desires to maximize its cash availability through the use of a Master Account and 3 zero-balance accounts: General operating, payroll, and Golf. In addition to, maintaining a separate operating Law Enforcement Trust Fund (LETf) account and one (1) Money Market account. Fraud protection must be maintained on all accounts.

The City is requiring a **compensating balance approach** to be proposed, the master account will operate on a "target balance" basis, whereby the required compensating balance to support activity charges would become the "target balance".

CITY OF MIAMI SPRINGS reserves the right to open additional accounts, including zero balance accounts, during the contract period at the price proposed in this proposal.

2. Master Account

The intent of the Master account is as follows:

- a. Have a single balance to support activity costs for all accounts.
- b. No checks are expected to be issued against this account.
- c. Deposits are made daily and delivered by a City of Miami Springs uniformed Police Officer.
- d. Process both incoming and outgoing wire transfers.
- e. Process an average of 2-3 million dollars each month.
- f. ACH deposits from customers and credit cards payments are processed.
- g. The general operating, payroll, and Golf accounts are to be maintained as zero balance accounts, with an automatic transfer of funds from the master account at the beginning of each business day in an amount sufficient to cover checks presented.

The following must apply:

- a. The bank must have the capability of receiving and/or disbursements of transactions, such as ACH, electronic transfers and wire transfers from the State, Federal, and Local governments for items such as state revenue sharing, federal grants and community development block grants.
- b. Monies shall earn interest on a daily basis.
- c. Funds deposited by 2 o'clock p.m. shall be available the next business day.
- d. Electronic Fund Transfers (EFT) will be credited and available on the same day at the time of transfer.

3. Operating Account (Zero Balance Account)

The intent of the operating account is as follows:

- a. Process general purpose disbursements from accounts payable.
- b. Positive pay is used.

4. Payroll Account (Zero Balance Account)maintained in-house

The intent of the payroll account is as follows:

- a. Payroll cycle is every two weeks, on a Friday.

- b. Direct Deposit is mandatory for all employees (approximately 230 employees during the "summer" (June - August) and 180 employees during the remaining months).
- c. Net payroll during each pay period is nearly \$236,000 during "summer" and \$211,000 for the remaining months.
- d. Processing vendor related accounts payable checks.
- e. Will operate as a "zero balance account," to which funds are automatically transferred from the Master account as payroll checks are presented to the bank for payment.
- f. Positive pay is used.

5. Golf Account (Zero Balance Account)

The intent of the Golf account is as follows:

- a. Processing payments for the Golf and Pro Shop Department.
- b. Deposits are made daily.
- c. ACH deposits from customers and credit cards payments are processed.
- d. Will operate as a "zero balance account," to which funds are automatically transferred from the Master account as needed.
- e. Checks are not written out of this account.

6. Law Enforcement Trust Fund (LETF) (Separate Operating Account)

The intent of the LETF account is as follows:

- a. Processing payments for the Police Department.
- b. Deposits and payments are made to this account.
- c. ACH deposits processed.
- d. There will be no credit cards processed.
- e. Positive pay is used.

7. Money Market (Investments - Safekeeping Agent)(Separate Operating Account)Approx. average held in account is \$1 million

The following must apply:

- a. When collateral securities are pledged or when securities and/or investments are purchased by CITY OF MIAMI SPRINGS, the securities must be held by a third-party custodial agent. This safekeeping function is to be provided for all securities, including those held under a repurchase agreement, and safekeeping receipts must be issued to the Board.
- b. The bank will handle the purchase or liquidation of investments only upon written instruction by the Mayor and either the City Treasurer or the Finance Director (dual signature is required).
- c. Investment transactions must be consummated on the same day that instructions indicate. Failure to consummate investments on a timely basis will constitute a breach of contract, and will constitute cause for immediate cancellation of the contract, or legal action for damages, or both.

- d. Upon maturity or liquidation of an investment, written notification will be sent to the City's Finance Director showing the deposit of the proceeds. The same type of written notification will be required for all purchases of investments handled through the bank, whether purchased by check, wire transfer, electronic debit, etc. These notifications will be mailed on the same day that the transactions occur.
- e. The City reserves the right to invest in time deposits of any bank, U.S. Government securities, repurchase agreements, or other investments deemed legal and prudent in the opinion of the City. In no case will the City be awarded time deposits at rates lower than those established in the competitive marketplace.
- f. The bank shall provide safekeeping facilities for investments owned by the City, either within the bank's own facilities, or at the Federal Reserve. A copy of all safekeeping receipts will be issued to the City at the consummation of each investment transaction. A statement listing the details of all items in safekeeping will be furnished to the City at the end of each month.

8. Collateral

The following must apply:

- a. Prior to receiving CITY OF MIAMI SPRINGS' deposits, a bank must be certified as being a "Qualified Public Depository" under Chapter 280, Florida Statutes, and the Florida Security for Public Deposits Act. The characteristics of eligible collateral are subject to the criteria Chapter 280, Florida Statutes and will be further subject to modification as to quantity, quality and type of action of the State Treasurer. The pledge, substitution and withdrawal of collateral securities will also be achieved in accordance with procedures set forth in the Florida Security for Public Deposits Act as established in the State Treasurer's Office.

9. Banking Supplies

In addition to other documents and services customarily provided by banks, the following items must be included/available:

- a. Preprinted deposit slips per year, in duplicate
- b. Lock bags and/or Plastic deposit bags (as required by institution)

10. Wire Transfers

The following must apply:

- a. Wire funds in a timely manner, through the Federal Reserve System to other financial institutions, only upon designated CITY OF MIAMI SPRINGS officials' approval.
- b. Capability to enter into a repetitive electronic wire transfer agreement with the CITY OF MIAMI SPRINGS. In order to maintain audit controls the bank will be provided with written guidelines to follow regarding these

transfers.

- c. All wire transfers require verification or "call back" for authorization.
- d. Dual approval is required prior to releasing of any wires.

11. Direct Deposit

Direct deposit is mandatory for all city employees for salary payments.

The following must apply:

- a. The bank must act as the originating bank for the processing of such deposits through the Automated Clearing House (ACH) to the appropriate depository bank used by the employee.

12. Stop Payments Services

The following must apply:

- a. The bank shall provide stop payment services on checks issued as instructed by CITY OF MIAMI SPRINGS' Finance Director or their designee(s). Requests will be made through on-line banking services.

13. Returned Checks

The following must apply:

- a. All returned checks due to insufficient or uncollected funds must be automatically re-deposited a second time.
- b. If a check is returned a second time, the bank will return the check to CITY OF MIAMI SPRINGS via the United States Postal Service.

14. Reconciliation Services

The following must apply:

- a. The bank shall provide full check reconciliation services for the operating account.
- b. Deposit reconciliation service for the master account as well as the other accounts. If your reconciliation service includes features not mentioned within this RFP, then please describe, along with any incremental costs involved (See "Price Proposal Schedule" attached).

15. On-Line Banking

It is CITY OF MIAMI SPRINGS' intent to take advantage of on-line banking services.

- a. The bank must include all on-line services offered and include and related costs. (See "Price Proposal Schedule" attached).

16. Automated Clearing House Transactions (ACH), Electronic Funds Transfer (EFT) AND Direct Payroll Deposit

The following must apply for the bank:

- a. Be required to execute ACH, EFT, and Direct Payroll Deposit transactions as necessary.
- b. Notify the City by fax receipt of funds received through ACH. On the same business day, a credit memo should be e-mailed.
- c. Accept electronic funds transfers in the form of Electronic Funds Transfers (EFT's) from other public/private/governmental agencies for deposit to CITY OF MIAMI SPRINGS accounts.

17. ACH Positive Pay

In order to maintain audit controls the bank will be required to notify the City by e-mail of any "Alerts" or exceptions.

- a. All ACH Positive pays must require verification and authorization.
- b. Checks are issued every two weeks utilizing positive pay.

18. Disaster Recovery

The following must apply for the bank:

- a. Provide information regarding their disaster recovery plan, including specific plans related to serving CITY OF MIAMI SPRINGS in the event of a disaster.
- b. In the event of a disaster, such as a hurricane, flood, or civil unrest, the financial institution will have available, upon 24 hours notice, \$15,000 in cash for the City. The cash will be at a site mutually agreeable by both parties.
- c. Will have a facility open for the City's use within 72 hours after the disaster is over. This facility will also be used for other City business. The City recognizes that it might have to make special accommodations, such as security and a location, for this to occur.
- d. Will include the CITY OF MIAMI SPRINGS' needs in its disaster plan. Final details will be negotiated with the successful financial institution.

19. Designated Account Executives

- a. Provide the name of a designated account executive, as well as an alternate. The designated account executives must have authority to make timely decisions in the normal course of business.

20. Employee Benefits

- a. Proposer must include and detail any benefits or services it can offer to CITY OF MIAMI SPRINGS, at no charge.

21. Overnight Investment Account

- a. At the close of each business day, all collected balances in City accounts will earn interest in a Municipal investment account.

Alternative Investment Account

Please describe alternative investment options, and provide a 12-month rate history.

- a. All interest earnings will be computed in accordance with the negotiated rate that was agreed to in the contract for banking services. This negotiated rate shall be stated by prospective bidders as a rate that bears a direct relationship to the "average daily Fed Funds rate," as published in the Wall Street Journal. The rate bid by the bank will be quoted in decimal points, such as "the average daily Fed Funds rate, minus .35" (or 35 "basis points"), "the average daily Fed Funds rate, plus .10 etc. In no case will the City accept another source for computation of the interest rate.

22. Purchasing Card Program (currently under agreement with SunTrust Bank)

23. Lock Box Services (Not currently used)

24. Armored Services (Not currently used)

25. Coin Deposits (Not currently used)

26. Merchant Services (currently under agreement with other provider)

27. Other Services

From time to time, the City may be required to open additional accounts not currently part of this agreement. When this occurs, the bank will set up and maintain additional accounts for the City. The cost will be consistent with the provisions of this contract.

The City reserves the right to establish accounts in other banks for additional services necessary to carry out City business.

CITY OF MIAMI SPRINGS requests the bank to specify any other services it may offer CITY OF MIAMI SPRINGS as part of its proposal, including but not limited to Credit Card Processing Services, mobile banking, etc.

28. Failures

The bank shall agree to reimburse CITY OF MIAMI SPRINGS for interest lost due to the bank's delay of a scheduled transfer of funds. If, on occasion, due to error by CITY OF MIAMI SPRINGS, other financial institutions, or wiring funds, CITY OF MIAMI SPRINGS' account balance is overdrawn; the bank will continue to honor checks drawn of CITY OF MIAMI SPRINGS' accounts and will immediately notify the Finance Department by telephone. CITY OF MIAMI SPRINGS will then reimburse the bank by depositing whatever money is necessary to cover the overdraft.

29. Mergers

In the event that the bank to which the contract is awarded merges with another financial institution, CITY OF MIAMI SPRINGS has the option to remain with the new financial institution or cancel the contract by giving ninety (90) days advance written notice to the financial institution.

30. Cost of Banking Services

Monthly, the bank will prepare an account analysis (utilizing the contracted fee schedules from the "Price Proposal Schedule" attached) of services rendered and invoice CITY OF MIAMI SPRINGS for services provided. The compensation to the bank will be made as follows:

- a. The bank will state what the fixed compensating balance held at the bank to offset the cost of services during the duration of this contract based on the "Price Proposal Schedule" attached. This should include all services whether they are referenced in this RFP or not.

31. Additional Services Required

The selected proposer must provide:

- a. Cashing without charge all petty cash checks presented by employees furnishing proper identification.
- b. Daily automated (FTP) transmission of check's paid.
- c. Daily transmission of the previous day's bank statement, including deposits received transactions.
- d. Acknowledgment receipt/sent of each transmission, as all transmissions are done via secure FTP to/from the City's mainframe system and the selected Proposer.
- e. Monthly reconciliation files including, but not limited to, Statements showing cleared checks, outstanding checks, stop and voided checks.
- f. Daily bank statements which must include:
 - I. Detail of account activity
 - II. Deposits, ACH transfers in and out; wire transfers in and out
 - III. Checks paid
 - IV. Charges/Adjustments
 - V. Every entry on the statement must have a unique sequence number

- a. Wires and ACH transfers must have a tracer number.
 - b. Investments debits and credits must have a CUSIP number
 - c. Deposits must be bar coded with the location number shown on the deposit ticket as well as a unique sequence number.
 - d. Supporting debit and credit vouchers.
- VI. Images of front and back sides of cleared checks. Images must be provided on-line and on CD-Rom.
- VII. The statement cut-off must be the close of business each day (EST)
- VIII. Provide secure on-line business services through the internet that must provide the City with access to the bank accounts' information. The access must allow the City to initiate and view transactions processed. This service must have the ability for authorized City personnel to:
- a. Input stop payments, ACH, wire transfers, etc., and obtain confirmation of acceptance by selected proposer.
 - b. Inquire on bank account data and transaction history, including, but not limited to, stop payments, check clearing, ACH transfers with addendum, internal transfers, incoming and outgoing wire transfers.
 - c. View online opening balances and previous day debits and credits by 8:00 A.M. (EST) each business day.
- IX. A System that must accept Positive Pay inquiries for daily "pay" or "no pay" decisions and allow for manual check updates for those accounts on Positive Pay by 3:00 P.M. (EST).

F. Selection Criteria

The award must be made to the respondent determined to be the lowest, most responsive proposal to the City, taking into consideration the objectives and criterion set forth in this RFP.

The following criteria will be utilized by CITY OF MIAMI SPRINGS in the evaluation of proposals:

- a. The collective cost of banking services.
- b. The proposed earnings rate on overnight cash balances.
- c. Quality, quantity and relevance of a bank's experience, resources, and services including continuity of bank personnel who will service our account. Any past experiences with the bank may be taken into consideration.
- d. Physical proximity of CITY OF MIAMI SPRINGS locations and activities to banking locations.
- e. Ability to meet credit worthiness tests - financial statements
- f. Capacity to provide electronic banking services.
- g. Cost of conversion from current bank to awarded bank (if applicable).

G. Contents of Qualifications Statement

The following must be included:

1. Title Page

- a. name of the bank
- b. address
- c. telephone number
- d. name of contact person(s)
- e. Request for Proposal #05-15/16- Banking Services

2. Table of Contents

- a. Outline in sequential order the major areas of the submittal, including enclosures.
- b. All pages must be consecutively numbered and correspond to the Table of Contents.

3. Proposal Transmittal Letter

- a. Provide a Letter of Interest indicating the specific project(s) for which the Proposer is applying.
- b. Provide a narrative which addresses the scope of work, the proposed approach to the work, and commitment to work.
- c. Include any other information called for by the RFP.

4. Qualifications of the Proposer and Supervisory Team

- a. Indicate the Proposer's number of years of experience in providing Outdoor Advertising Services.
- b. Licenses and any other pertinent information must be submitted. The minimum qualification requirements are described within this RFP.
- c. List the members of the proposer's supervisory team. Provide a list of the personnel to be used on each project and their qualifications. A brief resume including education, experience, licenses and any other pertinent information must be included for each team member, for each project, including sub consultants to be assigned to each project.
- d. Provide any other documentation which demonstrates their ability to satisfy all of the minimum qualification requirements.

5. Previous Similar Services Offered (Services must be relevant):

- a. A list of similar services must be submitted.
- b. Information must include Client name, address, phone number; description of work, year project was completed, total fees paid to firm, total cost of the services estimated and actual.
- c. References and contact information provided must not exceed two (2) years from the year 2016 and must be current.

6. Forms

Any firm(s) involved in a joint venture in its Proposal will be evaluated individually, as each firm of the joint venture would have to stand on its own merits.

- a. Proposer must clearly reflect in its Proposal, any Sub-Consultants proposed to be utilized, and provide for the sub-consultant the same information required of Consultant. The CITY OF MIAMI SPRINGS retains the right to accept or reject any Sub-Consultants proposed.

Throughout this RFP, the phrases "must" and "shall" will denote mandatory requirements. Any Proposer's proposed system that does not meet the mandatory requirements may be subject to immediate disqualification. When responding to this RFP, all Proposers must adhere to the guidelines defined within this RFP. Any and all Responses that do not follow the prescribed format are subject to immediate disqualification.

FAILURE TO SUBMIT ALL OF THE ABOVE REQUIRED DOCUMENTATION MAY DISQUALIFY PROPOSER.

RFP INFORMATION FORM

I certify that any and all information contained in this RFP is true; and I further certify that this RFP is made without prior understanding, agreement, or connections with any corporation, firm or person submitting a RFP for the same materials, supplies, equipment, or services and is in all respects fair and without collusion or fraud. I agree to abide by all terms and conditions of the RFP, and certify that I am authorized to sign for the Proposer firm.

Please print the following and sign your name:

Firm's Name: _____

Principal Business Address:

Telephone: _____ Fax: _____

E-mail address: _____@_____

Name: _____

Title: _____

Authorized Signature: _____

FAILURE TO COMPLETE, SIGN, AND RETURN THIS FORM MAY DISQUALIFY YOUR RESPONSE

**CERTIFICATE OF AUTHORITY
(IF CORPORATION)**

STATE OF:

COUNTY OF:

I HEREBY CERTIFY that a meeting of the Board of Directors of the

a corporation existing under the laws of the State of _____, held on _____, 20____, the following resolution was duly passed and adopted: "RESOLVED, that, as President of the Corporation, be and is hereby authorized to execute the Proposal dated, _____, 20____, to City of Miami Springs and this corporation and that their execution thereof, attested by the Secretary of the Corporation, and with the Corporate Seal affixed, shall be the official act and deed of this Corporation."

I further certify that said resolution is now in full force and effect.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the corporation this _____, day of _____, 20____.

Secretary: _____

(SEAL)

FAILURE TO COMPLETE, SIGN, AND RETURN THIS FORM MAY DISQUALIFY YOUR RESPONSE

**CERTIFICATE OF AUTHORITY
(IF PARTNERSHIP)**

STATE OF:

COUNTY OF:

I HEREBY CERTIFY that a meeting of the Board of Directors of the

a corporation existing under the laws of the State of _____,
held on _____, 20 _____, the following resolution was duly passed
and adopted: "RESOLVED, that, _____, as _____ of
the Partnership, be and is hereby authorized to execute the Proposal dated,
_____ 20_____, to City of Miami Springs and this partnership and that
their execution thereof, attested by the _____ shall
be the official act and deed of this Partnership."

I further certify that said resolution is now in full force and effect.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official
seal of the corporation this _____ day of _____, 20____

Secretary: _____

(SEAL)

FAILURE TO COMPLETE, SIGN AND RETURN THIS FORM MAY DISQUALIFY YOUR RESPONSE

**CERTIFICATE OF AUTHORITY
(IF JOINT VENTURE)**

STATE OF:

COUNTY OF:

I HEREBY CERTIFY that a meeting of the Principals of the

organized and existing under the laws of the State of _____ held on _____, 20_____, the following resolution was duly passed and adopted: "RESOLVED, that, _____ as _____ of the Joint Venture be and is hereby authorized to execute the Proposal dated, _____ 20____, to City of Miami Springs official act and deed of this Joint Venture."

I further certify that said resolution is now in full force and effect.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the corporation this _____, day of _____, 20_____.

Secretary: _____

(SEAL)

FAILURE TO COMPLETE, SIGN, AND RETURN THIS FORM MAY DISQUALIFY YOUR RESPONSE.

**CERTIFICATE OF AUTHORITY
(IF INDIVIDUAL)**

STATE OF:

COUNTY OF:

SS:

I HEREBY CERTIFY that as an individual, _____
(Name of Individual)

and as a d/b/a (doing business as) _____
(if applicable)

exist under the laws of the State of Florida. "RESOLVED, that, as an individual and/or d/b/a (if applicable), be and is hereby authorized to execute the Proposal dated, _____, 20____, to City of Miami Springs as an individual and/or d/b/a (if applicable) and that my execution thereof, attested by a Notary Public of the State, shall be the official act and deed of this attestation."

I further certify that said resolution is now in full force and effect.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of Notary Public this _____, day of _____, 20____.

NOTARY PUBLIC: _____

Commission No.: _____

I personally know the individual/ do not know the individual (Please Circle)

Driver's License # _____

(SEAL)

FAILURE TO COMPLETE, SIGN, AND RETURN THIS FORM MAY DISQUALIFY YOUR RESPONSE

NO CONFLICT OF INTEREST, NON-COLLUSION CERTIFICATION

Submitted this _____ day of _____, 2016.

The undersigned, as Proposer/Respondent, declares that the only persons interested in this RFP are named herein; that no other person has any interest in this RFP or in the Contract to which this RFP pertains; that this response is made without connection or arrangement with any other person; and that this response is in every respect fair and made in good faith, without collusion or fraud.

The Proposer/Respondent agrees if this response/submission is accepted, to execute an appropriate City of Miami Springs document for the purpose of establishing a formal contractual relationship between the Proposer/Respondent and the City of Miami Springs, for the performance of all requirements to which the Response/submission pertains.

The Proposer/Respondent states that this response is based upon the documents identified by the following number: RFP No. _____.

The full names and residences of persons and firms interested in the foregoing bid/proposal, as principals, are as follows:

Name	Street Address	City	State	Zip

The Proposer/Respondent further certifies that this Response/Submission complies with the Charter of the City of Miami Springs, Florida, that, to the best of its knowledge and belief, no Commissioner, Mayor, or other officer or employee of the City of Miami Springs has an interest directly or indirectly in the profits or emoluments of the Contract, job, work or service to which the Response/Submission pertains.

SIGNATURE

PRINTED NAME

TITLE

COMPANY NAME

FAILURE TO COMPLETE, SIGN, AND RETURN THIS FORM MAY DISQUALIFY YOUR RESPONSE

PROPOSER'S QUALIFICATION STATEMENT

INSTRUCTIONS:

This questionnaire is to be included with your Response. **Do not leave any questions unanswered.** When the question does not apply, write the word(s) "None", or "Not Applicable", as appropriate. Please print.

COMPANY NAME: _____

COMPANY OFFICERS:

President _____ Vice President _____

Secretary _____ Treasurer _____

COMPANY OWNERSHIP:

_____	_____ % of ownership

LICENSES:

1. County or Municipal Occupational License No. _____
(attach copy with Proposal)
2. Occupational License Classification _____
3. Occupational License Expiration Date: _____
4. Social Security or Federal I.D. No. _____

EXPERIENCE:

5. Number of Years your organization has been in business: _____
6. Number of Years experience PROPOSER (person, principal of firm, owner) has had in operation of the type required by the specifications of the RFP:

7. Number of Years experience PROPOSER (firm, corporation, proprietorship) has had in operation of the type required by the specifications of the RFP:

FAILURE TO COMPLETE, SIGN, AND RETURN THIS FORM MAY DISQUALIFY YOUR RESPONSE

**CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER
RESPONSIBILITY MATTERS**

1. The applicant certifies that it and its principals:
 - (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;
 - (b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
 - (d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default; and

2. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

Signature

Date

Official Address (including Zip Code)

FAILURE TO COMPLETE, SIGN, AND RETURN THIS FORM MAY DISQUALIFY YOUR RESPONSE

INDEMNIFICATION AND HOLD HARMLESS

To the fullest extent permitted by law, rule, regulation, or other applicable governmental provisions, FIRM

("_____") shall indemnify, defend and
FIRM NAME

hold harmless OWNER and PROJECT MANAGER, their representatives, officers, officials, and employees ("Indemnitees"), from and against all claims, damages, losses, liens, causes of action, suits, judgments, costs or expenses, including but not limited to reasonable attorney's fees ("Claims"), to the extent caused by the negligence, recklessness, or intentional wrongful misconduct of the FIRM and persons employed or utilized by the FIRM in the performance of the Contract.

FAILURE TO COMPLETE, SIGN, AND RETURN THIS FORM MAY DISQUALIFY YOUR RESPONSE

Title: Banking Services		NAME OF BIDDER:		
Service Description	Estimated Monthly Volume			
Basis Points		High		Low
Compensating Balance				
GENERAL SERVICES				
Checks paid	573			
Credits posted	63			
Checks returned w/ statement	0			
BR-Cash deposit fee	450			
Multiple statements	4			
BR-Nonstandard cash process surcharge				
Account maintenance	4			
Non Depositor check cashing fee	3			
Master account maintenance	1			
Sub account maintenance	2			
Deposited items	442			
Deposit corrections	1			
Overdraft fee	0			
NSF charge	0			
	0			
GENERAL SERVICES TOTAL				
RETURNS				
Deposited items-charged back	1			
Re-deposited items	2			
Returns special instruction-complex	1			
Telephone notification maintenance	0			
	0			
RETURNS TOTAL				

Title: Banking Services		NAME OF BIDDER:		
Service Description	Estimated Monthly Volume			
Basis Points		High		Low
Compensating Balance				
ACH				
Misc Items Paid	66			
File Processed	4			
Deposits	152			
Maintenance	2			
ACH returns	1			
ACH positive pay- maintenance	4			
ACH-WC plus single item	41			
ACH originated items- PPD debit	44			
ACH originated items- PPD credit	798			
ACH originated items- CCD debit	2			
ACH originated items- CCD credit	2			
Notifications of change	2			
ACH TOTAL				
CUSTOMER CASH LETTER				
Deposits	33			
Un-encoded deposit items	5			
CUSTOMER CASH LETTER TOTAL				
CASH SERVICES				
MC-disposable bags processed	5			
MC-cash deposit processing	141			
CASH SERVICES TOTAL				

Title: Banking Services		NAME OF BIDDER:		
Service Description	Estimated Monthly Volume			
Basis Points		High		Low
Compensating Balance				
PAID CHECK IMAGE				
Paid check image maintenance	3			
Paid check image: CD-ROM/DVD per item	244			
Paid check image: CD-ROM per CD	1			
Paid check image viewed WC Advantage	7			
PAID CHECK IMAGE TOTAL				
ACCOUNT RECONCILIATION				
Outstanding issue items on file	1369			
Serial sort per item	212			
Basic positive pay maintenance	1			
Basic positive pay per item	212			
Positive pay exception item image	1			
Positive pay exceptions	1			
ACCOUNT RECONCILIATION TOTAL				
BANK CONNECTION				
Electronic advice report	116			
Advantage Pkg. 1 Account maintenance	5			
Advantage Current day report access	59			
Advantage Pkg. 1 prior day item Tier 1-3	591			
Advantage current day item	260			
Advantage stop payment	1			
Advantage check status inquiry	1			
Advantage proactive notification	3			
BANK CONNECTION TOTAL				

Title: Banking Services		NAME OF BIDDER:		
Service Description	Estimated Monthly Volume			
Basis Points		High		Low
Compensating Balance				
GLOBAL WIRE TRANSFER *				
Account transfer	1			
Domestic transfer	14			
Account transfer credit	1			
Incoming wire	1			
Book transfer credit	2			
Wire transfer advice	4			
Wire template storage	13			
Debits posted	14			
Electronic credits posted	3			
GLOBAL WIRE TRANSFER TOTAL				
MISC SERVICES				
Implementation- One time Cost	0			
ACH Service	0			
CD-Rom Service	0			
ACH Fraud Control Acct. Set up	0			
ACH Fraud Control Filter Set up	0			
Wire Transfer Acct.	0			
Online treasury Manager Service	0			
Online Courier Optional	0			
OLC Wire Transfer Email Advice	0			
OLC Cash Position Report	0			
OLC ACH Return Report	0			
OLC DDA Statement	0			
OLC ACH Fraud Control Reject report	0			
OLC Analysis Statement	0			
MISC SERVICES TOTAL				
TOTAL BANKING CHARGES				

City of Miami Springs Vendor Application



Purchasing Department
201 Westward Drive,
First Floor
Miami Springs, Florida 33166
Phone: (305) 805-5035
Fax: (305) 805-5040



Business Name: _____

Order Address: _____ City: _____ State: _____ Zip: _____

Pay to Address: _____ City: _____ State: _____ Zip: _____
(if different)

Bid Address: _____ City: _____ State: _____ Zip: _____

Telephone: (_____) _____ Fax: (_____) _____

Email Address: _____ Website URL: _____

Contact Person: _____ Title: _____

Federal I.D. No.: _____ Date Business Established: _____

Business is: Corporation Proprietorship Partnership Other: _____

Primary business classification (check all that apply):

Retailer Wholesaler Manufacturer Services Prime Contractor Sub Contractor

Please see the enclosed commodity list to properly identify the commodities and/or services which your firm provides. Please mail completed Vendor Application to the mailing address above.

Does your organization currently accept Visa (P-Cards) as form of payment? Yes No

The undersigned does hereby certify that the foregoing and subsequent statements are true and correct.

Print Name: _____ Title _____

Signature: _____ Date: _____

ALL VENDOR APPLICATIONS MUST BE ACCOMPANIED BY A COMPLETED W-9 FORM.

**PLEASE SEE THE ATTACHED COMMODITY LIST TO PROPERLY IDENTIFY THE
COMMODITIES AND/OR SERVICES WHICH YOUR FIRM PROVIDES**

#	DESCRIPTION	#	DESCRIPTION
005	ABRASIVES	220	CONTROL, INDICA, RECORD INSTR
010	ACOUST TILE, INSULT. MATERIAL	225	COOLER, DRINKING WATER
015	COPYING MACHINE SUPPLIES	232	CRAFTS, GENERAL
020	AGRICULTURAL EQUIPMENT	233	CRAFTS, SPECIALIZED
025	AIR COMPRESSOR AND ACCESS	240	CUTLERY, DISHES ETC.
031	AIR CONDITIONINGS & HEATING	265	DRAPES, CURTAINS, UPHOLSTERY
035	AIRCRAFT EQUIPMENT	270	DRUGS, PHARMAC & BIOLOGY
040	ANIMALS LIVE	280	ELECTRICAL CABLES & WIRES
045	APPLIANCES, HOUSEHOLD	285	ELECTRICAL EQUIP & SUPPLY
050	ART EQUIPMENT & SUPPLIES	287	ELECTRONIC COMPONENTS
052	ART OBJECTS	290	ENERGY COLLECTING EQUIP
055	AUTO & TRUCK ACCESSORIES	295	ELEVATORS
060	AUTO & TRUCK MAINT. ITEMS	300	EMBOSSING/ENGRAVING
065	AUTO BODIES & ACCESSORIES	305	ENGINEERING EQUIPMENT
070	AUTO MAJOR TRANSPORATION	310	ENVELOPES, PLAIN, PRINTED
075	AUTO SHOP EQUIPMENT & SUPP.	315	EPOXY BASED FORMULAS
080	BADGES & OTHER ID EQUIP	320	FASTENERS, FASTENING DEVICES
085	BAGS, BAGGING, TIES, EROSION	330	FENCING
090	BAKERY EQUIPMENT	335	FERTILIZER & SOIL CONDTN.
092	COPIER	340	FIRE PROTECTION EQUIP/SUPP
095	RAZORS, BLADES, ETC.	345	FIRST AID & SAFETY EQUIP
100	BARRELS, DRUMS, KEGS, CTN.	350	FLAGS, POLES, BANNERS, ACC
103	MECHANICAL LIFT SYSTEM	360	FLOOR COVERING, INSTALLED
105	BEARINGS (EXCEPT WHEEL)	365	FLOOR MAINT MACHINE, PARTS
110	BELT & BELTING: CON & ELE	370	FOOD PRODUCTS & CAN EQUIP
115	DATA PROCESSING MAINT	375	FOOD: FRESH BAKERY
120	BOATS, MOTORS, & MARINE SUPP	380	FOOD: FRESH DAIRY
125	BOOKBINDING & BOOK SUPPLY	385	FOOD: FROZEN
130	BRICKS & CLAY PRODUCTS	390	FOOD: PERISHABLE
135	BRICKS & CLAY PRODUCTS	395	FORMS, CONT. COMPUTER
140	BRUSHES, BROOMS, MOPS	400	FOUNDRY CASTINGS, EUIP
145	BRUSHES (NOT CLASSIFIED)	405	FUEL, OIL, GREASE, & LUBES
150	BUILDER'S SUPPLIES	410	FURNITURE: HEALTHCARE
155	BUILDING, FABRICATED	415	FURNITURE, LAB, SPECIAL
165	CAFETERIA & KITCHEN EQUIP.	420	FURNITURE, NON-OFFICE
175	CHEMICAL LAB EQUIP & SUPPLIES	425	FURNITURE, OFFICE
180	CHEMICAL RAW MATERIAL	430	WELDING EQUIPMENT
190	CHEMICAL, COMMERCIAL, BULK	435	GERMICIDES/PERSONAL PROD
192	CLEANING COMP/ SOLVENTS	440	GLASS & GRAZING SUPPLIES
193	CLINICAL LAB TESTS	445	TOOLS, HAND (NOT CLASSED)
195	CLOCKS	450	HARDWARE, AND ALLIED ITEMS

#	DESCRIPTION	#	DESCRIPTION
200	CLOTHING & APPAREL	460	HOSES, ALL KINDS
205	COMPUTERS, DP & WORD PROC.	485	JANITORIAL SUPPLIES
210	CONCRETE & CORRGTD. METALS	490	LABORATORY EQUIP & ACC
515	LAWN EQUIPMENT	830	TANKS
525	LIBRARY MACH. & SUPPLIES	832	TAPE
530	LUGGAGE, BRIEF CASES	850	TEXTILES FIBERS HOUSEHOLD
540	LUMBER, WOODS, SIDINGS	855	THEATRICAL EQUIPMENT
545	MACHINERY & HEAVY HRWARE	863	TIRES AND TUBES
550	MARKERS, PLAQUES, SIGNS	870	VENETIAN BLINDS ETC
555	MARKING DEVICES	880	VISUAL EDUCATION EQUIPMENT
560	MATERIAL HANDLING EQUIP.	885	WATER TREATING CHEMICALS
570	METALS, BARS, PLATES, RODS	890	WATER/SEWAGE TREAT EQUIP
575	MICROFICHE, MICROFILM	895	WELDING EQUIPMENT/SUPPLY
595	NURSERY STOCK & SUPPLIES	905	AIRCRAFT
600	OFFICE MACHINES & ACCESS.	910	BUILDING MAINTENANCE/REPAIR
605	OFFICE MECH AIDS, SMALL	915	COMMUNICATION/MEDIA SERV
610	OFFICE SUPPLIES, PAPER/RIBBONS	920	DP PROCESSING & SOFTWARE
615	OFFICE SUPPLIES	924	EDUCATIONAL SERVICES
620	OFFICE SUPPLIES, INKS, LEADS	925	EQUIPMENT & REPAIR
625	SAFETY EQUIPMENT	930	EQUIPMENT RENTAL
630	PAINTS, COATING, WALLPAPER	932	FINANCIAL SERVICES
635	PAINTING EQUIPMENT & ACC.	935	HEALTH RELATED SERVICE
640	PAPER & PLASTIC-DISPOSABLE	945	LIBRARY SERVICES
645	PAPER	947	MISCELLANEOUS SERVICES
650	PARK, PLAYGROUND, SWIMMING	952	HUMAN SERVICE
655	PHOTOGRAPHIC EQUIPMENT	954	LAUNDRY/DRY CLEANING SERVICES
665	PLASTICS	955	PUBLIC WORKS & RELATED SERVICE
670	PLUMBING EQUIPMENT	958	REAL/PROPERTY RENTAL
673	PIPE, FITTINGS & VALVES	960	GROUND & PARK SERVICES
675	POISONS: AGRICUL & INDUSTRIAL	964	PERSONNEL TEMPORARY
680	POLICE EQUIPMENT & SUPPLY	965	SECURITY, FIRE/SAFETY SERVICES
695	PRINTING & SILK SCREENING	970	SHIPPING AND HANDLING
715	PUBLICATION/AUDIOVISUAL		PLEASE LIST BELOW ANY OTHER SERVICE OR COMMODITY
720	PUMPS & ACCESSORIES		
725	RADIO & TELECOMMUNICATION		
730	TELEVISION EQUIPMENT		
735	RAGS, SHOP TOWELS, WIPING		
740	REFRIGERATION EQUIPMENT		
745	ROAD & HIGHWAY MATERIALS		
755	ROAD/HIGHWAY EQUIPMENT		
770	ROOFING MATERIALS		
775	SALT		
785	SCHOOL & HIGHER EDUCATION		
790	SEED, SOD, SOIL & INOCULANT		
800	SHOES AND BOOTS		
803	SOUND SYSTEMS & ACCESSORY		
805	SPORTING & ATHLETIC EQUIP		

Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>	
	5 Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number											
				-			-				

or

Employer identification number										
				-						

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),

3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code* on page 3 and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships* above.

What is FATCA reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code* on page 3 and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note. ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

Limited Liability Company (LLC). If the name on line 1 is an LLC treated as a partnership for U.S. federal tax purposes, check the "Limited Liability Company" box and enter "P" in the space provided. If the LLC has filed Form 8832 or 2553 to be taxed as a corporation, check the "Limited Liability Company" box and in the space provided enter "C" for C corporation or "S" for S corporation. If it is a single-member LLC that is a disregarded entity, do not check the "Limited Liability Company" box; instead check the first box in line 3 "Individual/sole proprietor or single-member LLC."

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space in line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note. You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on this page), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code* earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee ¹ The actual owner ¹
5. Sole proprietorship or disregarded entity owned by an individual	The owner ³
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity ⁴
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(E))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 2.

*Note. Grantor also must provide a Form W-9 to trustee of trust.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.



CITY OF MIAMI SPRINGS
Branch Banking and Trust Corp

AA
As Of Date:
Printed On: May 2

Branch Banking
GROUP A

As of 2016-04-06

Feed Name: ACCTS



04-05-2016

AA
CITY OF MIAMI SPRINGS
201 WESTWARD DR
MIAMI SPRINGS FL 33166-5259

FROM 03-01-2016
TO 03-31-2016

***** HOLD STATEMENT *****

PAGE 1

ACCOUNT OFFICER LAURIE A ZAPLETAL

67955

GROUP NO.

COMBINED ANALYSIS

		ACCOUNTS INCLUDED IN ANALYSIS			
DEPOSITS					
	01	0	01		
	01		01		
AVERAGE BALANCE SECTION		BALANCE	RATE	AMOUNT	
AVERAGE BALANCE		1,485,888			
LESS: AVERAGE FLOAT		14,385			
AVERAGE COLLECTED BALANCE		1,471,502			
AVG POSITIVE COLLECTED BAL		1,471,502			
LESS: REQUIRED RESERVES		0			
AVG POSITIVE AVAILABLE BAL		1,471,502	.600	747.81	
EARNINGS CREDIT ALLOWANCE				747.81	
BANK SERVICES SECTION		UNITS	RATE	AMOUNT	BAL REQUIRED
** GENERAL BANKING SERVICES **					
MAINTENANCE FEE		4	8.000	32.00	62,967.74
CREDITS POSTED		132	.300	39.60	77,922.58
ITEMS DEPOSITED - BB&T		16	.060	.96	1,889.03
ITEMS DEPOSITED - IN STATE		154	.060	9.24	18,181.93
ITEMS DEPOSITED - OTHER		28	.060	1.68	3,305.80
CHECKS PAID AND OTHER DEBITS		308	.060	18.48	36,363.87
CHECK CHARGES		1	73.270	73.27	
**BILLED SEPARATELY					
COIN AND CURRENCY DEPOSITED		38,379	.0019	72.92	143,487.74
** SUBTOTAL **				248.15	344,118.69
** WIRE TRANSFER SERVICES **					
INCOMING WIRE		1	8.000	8.00	15,741.93
CMOL NON REPETITIVE WIRE		3	8.000	24.00	47,225.80
CMOL REPETITIVE WIRE		1	8.000	8.00	15,741.93
CMOLINE WIRE MAINT		1	10.000	10.00	19,677.41
** SUBTOTAL **				50.00	98,387.07
** ACH SERVICES **					

Branch Banking
GROUP A

As of 2016-04-06

Feed Name: ACCTS

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04-05-2016

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CITY OF MIAMI SPRINGS
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***** HOLD STATEMENT *****

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ACCOUNT OFFICER LAURIE A ZAPLETAL

67955

GROUP NO.

COMBINED ANALYSIS

	UNITS	RATE	AMOUNT	BAL REQUIRED
BANK SERVICES SECTION				
ACH RECEIVED DEBIT	24	.190	4.56	8,972.90
ACH MONTHLY MAINTENANCE	2	35.000	70.00	137,741.93
TOTAL ACH ORIGINATED ITEMS	664	.140	92.96	182,921.29
ACH AUTHORIZATION RECORD	2	5.000	10.00	19,677.41
ACH POSITIVE PAY MONTHLY MAINT	4	10.000	40.00	78,709.67
CMOL ACH FILE	6	5.000	30.00	59,032.25
** SUBTOTAL **			263.72	518,932.86
** RECONCILIATION SERVICES **				
SMALL BUSINESS CD-ROM MAINT	4	.000	.00	
SMALL BUSINESS CD-ROM ITEMS	19	.050	.95	1,869.35
SMALL BUSINESS CD-ROM ITEMS	232	.000	.00	
** SUBTOTAL **			.95	1,869.35
** POSPAY/REVERSE POS PAY **				
POS PAY - MAINT	3	35.000	105.00	206,612.90
POS PAY - ITEMS	251	.080	20.08	39,512.25
** SUBTOTAL **			125.08	246,125.15
** INFORMATION SERVICES **				
CMOL CD ACCT MAINT	2	20.000	40.00	78,709.67
CMOL BUSINESS BANKING	4	25.000	100.00	196,774.19
CMOL - CD LOADED ITEMS	147	.000	.00	
CMOL BUSBANK - PD LOADED ITEMS	612	.000	.00	
CMOL BUSBANK - ACCT TRANSFER	2	.000	.00	
CMOL BUSBANK - IMAGE RETRIEVED	3	2.000	6.00	11,806.45
CMOL BUSBANK - IMAGE RETRIEVED	5	.000	.00	
** SUBTOTAL **			146.00	287,290.31
** CASH MANAGEMENT SERVICES **				
ZBA MASTER ACCOUNT MAINTENANCE	1	25.000	25.00	49,193.54
ZBA ACCOUNT MAINTENANCE	2	10.000	20.00	39,354.83
** SUBTOTAL **			45.00	88,548.37
BANK SERVICES			805.63	1,585,271.93
BANK SERVICES:BILL SEPARATE			73.27	

[REDACTED]		Branch Banking GROUP A
As of 2016-04-06		
Feed Name: ACCTS		
BB&T		
		04-05-2016
[REDACTED] AA		
CITY OF MIAMI SPRINGS		
201 WESTWARD DR		FROM 03-01-2016
MIAMI SPRINGS FL 33166-5259		TO 03-31-2016
***** HOLD STATEMENT *****		PAGE 3
ACCOUNT OFFICER LAURIE A ZAPLETAL		67955
GROUP NO. [REDACTED]	COMBINED ANALYSIS	
NET EARNINGS VALUE		57.82-
NET AVAILABLE BALANCE	113,769-	
AVERAGE BALANCE DEFICIT	113,769-	
***SERVICE CHARGE AMOUNT	57.82	
	TO ACCOUNT	[REDACTED]

Branch Banking
GROUP A

As of 2016-04-06

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AA
CITY OF MIAMI SPRINGS
OPERATING ACCT
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MIAMI SPRINGS FL 33166-5259

FROM 03-01-2016
TO 03-31-2016

***** HOLD STATEMENT *****

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ACCOUNT OFFICER LAURIE A ZAPLETAL

67955

GROUP NO. [REDACTED]
ACCOUNT NO. 01 [REDACTED]

COMBINED ANALYSIS
PUBLIC FUND ANALYZED CHECKING

AVERAGE BALANCE SECTION	BALANCE	RATE	AMOUNT
AVERAGE BALANCE	1,107,845		
LESS: AVERAGE FLOAT	14,385		
AVERAGE COLLECTED BALANCE	1,093,459		
AVG POSITIVE COLLECTED BAL	1,093,459		
LESS: REQUIRED RESERVES	0		
AVG POSITIVE AVAILABLE BAL	1,093,459	.190	175.96

EARNINGS CREDIT ALLOWANCE			175.96

BANK SERVICES SECTION	UNITS	RATE	AMOUNT	BAL REQUIRED
** GENERAL BANKING SERVICES **				
MAINTENANCE FEE	1	8.000	8.00	49,711.37
CREDITS POSTED	74	.300	22.20	137,949.06
ITEMS DEPOSITED - BB&T	14	.060	.84	5,219.69
ITEMS DEPOSITED - IN STATE	142	.060	8.52	52,942.61
ITEMS DEPOSITED - OTHER	28	.060	1.68	10,439.38
CHECKS PAID AND OTHER DEBITS	240	.060	14.40	89,480.47
CHECK CHARGES	1	73.270	73.27	
**BILLED SEPARATELY				
COIN AND CURRENCY DEPOSITED	6,486	.0019	12.32	76,555.51

** SUBTOTAL **			141.23	422,298.09
** WIRE TRANSFER SERVICES **				
INCOMING WIRE	1	8.000	8.00	49,711.37
CMOL NON REPETITIVE WIRE	3	8.000	24.00	149,134.12
CMOL REPETITIVE WIRE	1	8.000	8.00	49,711.37
CMOLINE WIRE MAINT	1	10.000	10.00	62,139.21

** SUBTOTAL **			50.00	310,696.07
** ACH SERVICES **				
ACH RECEIVED CREDIT	68	.120	8.16	50,705.60
ACH RECEIVED DEBIT	21	.190	3.99	24,793.54
ACH MONTHLY MAINTENANCE	1	35.000	35.00	217,487.26
ACH AUTHORIZATION RECORD	2	5.000	10.00	62,139.21
ACH POSITIVE PAY MONTHLY MAINT	1	10.000	10.00	62,139.21

** SUBTOTAL **			67.15	417,264.82

Branch Banking
GR. DUP A

As of 2016-04-06

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04-05-2016

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CITY OF MIAMI SPRINGS
OPERATING ACCT
201 WESTWARD DR
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***** HOLD STATEMENT *****

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ACCOUNT OFFICER LAURIE A ZAPLETAL

67955

GROUP NO. [REDACTED] COMBINED ANALYSIS
ACCOUNT NO. 01 [REDACTED] CONTINUED

BANK SERVICES SECTION	UNITS	RATE	AMOUNT	BAL REQUIRED
** RECONCILIATION SERVICES **				
SMALL BUSINESS CD-ROM MAINT	1	.000	.00	
SMALL BUSINESS CD-ROM ITEMS	19	.050	.95	5,903.22
SMALL BUSINESS CD-ROM ITEMS	200	.000	.00	
** SUBTOTAL **			.95	5,903.22
** POSPAY/REVERSE POS PAY **				
POS PAY - MAINT	1	35.000	35.00	217,487.26
POS PAY - ITEMS	219	.080	17.52	108,867.91
** SUBTOTAL **			52.52	326,355.17
** INFORMATION SERVICES **				
CMOL CD ACCT MAINT	1	20.000	20.00	124,278.43
CMOL BUSINESS BANKING	1	25.000	25.00	155,348.04
CMOL - CD LOADED ITEMS	134	.000	.00	
CMOL BUSBANK - PD LOADED ITEMS	413	.000	.00	
CMOL BUSBANK - ACCT TRANSFER	2	.000	.00	
CMOL BUSBANK - IMAGE RETRIEVED	3	2.000	6.00	37,283.53
CMOL BUSBANK - IMAGE RETRIEVED	5	.000	.00	
** SUBTOTAL **			51.00	316,910.00
** CASH MANAGEMENT SERVICES **				
ZBA MASTER ACCOUNT MAINTENANCE	1	25.000	25.00	155,348.04
** SUBTOTAL **			25.00	155,348.04
BANK SERVICES			314.58	1,954,775.41
BANK SERVICES:BILL SEPARATE			73.27	
NET EARNINGS VALUE			138.62-	
NET AVAILABLE BALANCE	861,315-			
AVERAGE BALANCE DEFICIT	861,315-			
***SERVICE CHARGE AMOUNT	138.62			

Branch Banking
GROUP A

As of 2016-04-06

Feed Name: ACCTS

BB&T

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AA
CITY OF MIAMI SPRINGS
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***** HOLD STATEMENT *****

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ACCOUNT OFFICER LAURIE A ZAPLETAL

67955

GROUP NO. [REDACTED]
ACCOUNT NO. 01 [REDACTED]

COMBINED ANALYSIS
PUBLIC FUND ANALYZED CHECKING

AVERAGE BALANCE SECTION	BALANCE	RATE	AMOUNT
AVERAGE BALANCE	0		
LESS: AVERAGE FLOAT	0		
AVERAGE COLLECTED BALANCE	0		
AVG POSITIVE COLLECTED BAL	0		
LESS: REQUIRED RESERVES	0		
AVG POSITIVE AVAILABLE BAL	0	.160	.00
EARNINGS CREDIT ALLOWANCE			.00

BANK SERVICES SECTION	UNITS	RATE	AMOUNT	BAL REQUIRED
** GENERAL BANKING SERVICES **				
MAINTENANCE FEE	1	8.000	8.00	59,032.25
CREDITS POSTED	25	.300	7.50	55,342.74
ITEMS DEPOSITED - BB&T	2	.060	.12	885.48
ITEMS DEPOSITED - IN STATE	11	.060	.66	4,870.16
CHECKS PAID AND OTHER DEBITS	36	.060	2.16	15,938.70
** SUBTOTAL **			18.44	136,069.33

** ACH SERVICES **				
ACH RECEIVED DEBIT	2	.190	.38	2,804.03
ACH MONTHLY MAINTENANCE	1	35.000	35.00	258,266.12
TOTAL ACH ORIGINATED ITEMS	664	.140	92.96	685,954.83
ACH POSITIVE PAY MONTHLY MAINT	1	10.000	10.00	73,790.32
CMOL ACH FILE	6	5.000	30.00	221,370.96
** SUBTOTAL **			168.34	1,242,186.26

** RECONCILIATION SERVICES **				
SMALL BUSINESS CD-ROM MAINT	1	.000	.00	
SMALL BUSINESS CD-ROM ITEMS	23	.000	.00	
** SUBTOTAL **			.00	.00

** POSPAY/REVERSE POS PAY **				
POS PAY - MAINT	1	35.000	35.00	258,266.12
POS PAY - ITEMS	23	.080	1.84	13,577.41
** SUBTOTAL **			36.84	271,843.53

Branch Banking
GROUP A

As of 2016-04-06

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CITY OF MIAMI SPRINGS
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***** HOLD STATEMENT *****

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ACCOUNT OFFICER LAURIE A ZAPLETAL

67955

GROUP NO. [REDACTED]
ACCOUNT NO. 01 [REDACTED]

COMBINED ANALYSIS
CONTINUED

BANK SERVICES SECTION	UNITS	RATE	AMOUNT	BAL REQUIRED
** INFORMATION SERVICES **				
CMOL BUSINESS BANKING	1	25.000	25.00	184,475.80
CMOL BUSBANK - PD LOADED ITEMS	65	.000	.00	
** SUBTOTAL **			25.00	184,475.80
** CASH MANAGEMENT SERVICES **				
ZBA ACCOUNT MAINTENANCE	1	10.000	10.00	73,790.32
** SUBTOTAL **			10.00	73,790.32
BANK SERVICES			258.62	1,908,365.24
NET EARNINGS VALUE			258.62-	
NET AVAILABLE BALANCE	1,908,365-			
AVERAGE BALANCE DEFICIT	1,908,365-			
***SERVICE CHARGE AMOUNT	258.62			

Branch Banking
GROUP A

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AA
CITY OF MIAMI SPRINGS
GOLF ACCT
201 WESTWARD DR
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***** HOLD STATEMENT *****

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ACCOUNT OFFICER LAURIE A ZAPLETAL

67955

GROUP NO. [REDACTED] COMBINED ANALYSIS
ACCOUNT NO. 01 [REDACTED] PUBLIC FUND ANALYZED CHECKING

AVERAGE BALANCE SECTION	BALANCE	RATE	AMOUNT	
AVERAGE BALANCE	0			
LESS: AVERAGE FLOAT	0			
AVERAGE COLLECTED BALANCE	0			
AVG POSITIVE COLLECTED BAL	0			
LESS: REQUIRED RESERVES	0			
AVG POSITIVE AVAILABLE BAL	0	.160	.00	
EARNINGS CREDIT ALLOWANCE			.00	

BANK SERVICES SECTION	UNITS	RATE	AMOUNT	BAL REQUIRED
** GENERAL BANKING SERVICES **				
MAINTENANCE FEE	1	8.000	8.00	59,032.25
CREDITS POSTED	31	.300	9.30	68,625.00
ITEMS DEPOSITED - IN STATE	1	.060	.06	442.74
CHECKS PAID AND OTHER DEBITS	23	.060	1.38	10,183.06
COIN AND CURRENCY DEPOSITED	31,893	.0019	60.60	447,169.35
** SUBTOTAL **			79.34	585,452.40
** ACH SERVICES **				
ACH RECEIVED CREDIT	57	.120	6.84	50,472.58
ACH RECEIVED DEBIT	1	.190	.19	1,402.01
ACH POSITIVE PAY MONTHLY MAINT	1	10.000	10.00	73,790.32
** SUBTOTAL **			17.03	125,664.91
** RECONCILIATION SERVICES **				
SMALL BUSINESS CD-ROM MAINT	1	.000	.00	
** SUBTOTAL **			.00	.00
** INFORMATION SERVICES **				
CMOL BUSINESS BANKING	1	25.000	25.00	184,475.80
CMOL BUSBANK - PD LOADED ITEMS	119	.000	.00	
** SUBTOTAL **			25.00	184,475.80

Branch Banking
GROUP A

As of 2016-04-06

Feed Name: ACCTS

BB&T

04-05-2016

AA
CITY OF MIAMI SPRINGS
GOLF ACCT
201 WESTWARD DR
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FROM 03-01-2016
TO 03-31-2016

***** HOLD STATEMENT *****

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ACCOUNT OFFICER LAURIE A ZAPLETAL

67955

GROUP NO. [REDACTED]
ACCOUNT NO. 01 [REDACTED] 0

COMBINED ANALYSIS
CONTINUED

BANK SERVICES SECTION	UNITS	RATE	AMOUNT	BAL REQUIRED
** CASH MANAGEMENT SERVICES **				
ZBA ACCOUNT MAINTENANCE	1	10.000	10.00	73,790.32
** SUBTOTAL **			10.00	73,790.32
BANK SERVICES			131.37	969,383.43
NET EARNINGS VALUE			131.37-	
NET AVAILABLE BALANCE	969,383-			
AVERAGE BALANCE DEFICIT	969,383-			
***SERVICE CHARGE AMOUNT	131.37			

Branch Banking
GROUP A

As of 2016-04-06

Feed Name: ACCTS

BB&T

04-05-2016

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CITY OF MIAMI SPRINGS
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***** HOLD STATEMENT *****

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ACCOUNT OFFICER LAURIE A ZAPLETAL

67955

GROUP NO. 0
ACCOUNT NO. 01

COMBINED ANALYSIS
PUBLIC FUND ANALYZED CHECKING

AVERAGE BALANCE SECTION	BALANCE	RATE	AMOUNT	
AVERAGE BALANCE	378,042			
LESS: AVERAGE FLOAT	0			
AVERAGE COLLECTED BALANCE	378,042			
AVG POSITIVE COLLECTED BAL	378,042			
LESS: REQUIRED RESERVES	0			
AVG POSITIVE AVAILABLE BAL	378,042	.190	60.83	
EARNINGS CREDIT ALLOWANCE			60.83	

BANK SERVICES SECTION	UNITS	RATE	AMOUNT	BAL REQUIRED
** GENERAL BANKING SERVICES **				
MAINTENANCE FEE	1	8.000	8.00	49,711.37
CREDITS POSTED	2	.300	.60	3,728.35
CHECKS PAID AND OTHER DEBITS	9	.060	.54	3,355.51
** SUBTOTAL **			9.14	56,795.23
** ACH SERVICES **				
ACH RECEIVED CREDIT	10	.120	1.20	7,456.70
ACH POSITIVE PAY MONTHLY MAINT	1	10.000	10.00	62,139.21
** SUBTOTAL **			11.20	69,595.91
** RECONCILIATION SERVICES **				
SMALL BUSINESS CD-ROM MAINT	1	.000	.00	
SMALL BUSINESS CD-ROM ITEMS	9	.000	.00	
** SUBTOTAL **			.00	.00
** POSPAY/REVERSE POS PAY **				
POS PAY - MAINT	1	35.000	35.00	217,487.26
POS PAY - ITEMS	9	.080	.72	4,474.02
** SUBTOTAL **			35.72	221,961.28
** INFORMATION SERVICES **				
CMOL CD ACCT MAINT	1	20.000	20.00	124,278.43

Branch Banking
GROUP A

As of 2016-04-06

Feed Name: ACCTS

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04-05-2016

AA
CITY OF MIAMI SPRINGS
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* * * * * HOLD STATEMENT * * * * *

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ACCOUNT OFFICER LAURIE A ZAPLETAL

67955

GROUP NO. 0
ACCOUNT NO. 01

COMBINED ANALYSIS
CONTINUED

BANK SERVICES SECTION	UNITS	RATE	AMOUNT	BAL REQUIRED
CMOL BUSINESS BANKING	1	25.000	25.00	155,348.04
CMOL - CD LOADED ITEMS	13	.000	.00	
CMOL BUSEBANK - PD LOADED ITEMS	15	.000	.00	
** SUBTOTAL **			45.00	279,626.47
BANK SERVICES			101.06	627,978.89
NET EARNINGS VALUE			40.23-	
NET AVAILABLE BALANCE	249,936-			
AVERAGE BALANCE DEFICIT	249,936-			
***SERVICE CHARGE AMOUNT	40.23			



CITY OF MIAMI SPRINGS
Branch Banking and Trust Corp

AA
As Of Dates
Printed On: May 2

Branch Banking
GROUP A

As of 2016-05-06

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05-05-2016

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CITY OF MIAMI SPRINGS
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TO 04-30-2016

***** HOLD STATEMENT *****

PAGE 1

ACCOUNT OFFICER LAURIE A ZAPLETAL

67955

GROUP NO.

COMBINED ANALYSIS

DEPOSITS		ACCOUNTS INCLUDED IN ANALYSIS			
01	01	01	01		
AVERAGE BALANCE SECTION		BALANCE	RATE	AMOUNT	
AVERAGE BALANCE		1,423,083			
LESS: AVERAGE FLOAT		10,824			
AVERAGE COLLECTED BALANCE		1,412,259			
AVG POSITIVE COLLECTED BAL		1,412,259			
LESS: REQUIRED RESERVES		0			
AVG POSITIVE AVAILABLE BAL		1,412,259	.600	694.55	
EARNINGS CREDIT ALLOWANCE				694.55	
BANK SERVICES SECTION		UNITS	RATE	AMOUNT	BAL REQUIRED
** GENERAL BANKING SERVICES **					
MAINTENANCE FEE		4	8.000	32.00	65,066.66
CREDITS POSTED		125	.300	37.50	76,250.00
ITEMS DEPOSITED - BB&T		20	.060	1.20	2,440.00
ITEMS DEPOSITED - IN STATE		195	.060	11.70	23,790.00
ITEMS DEPOSITED - OTHER		29	.060	1.74	3,538.00
CHECKS PAID AND OTHER DEBITS		265	.060	15.90	32,330.00
CHECK CHARGES		1	73.270	73.27	
**BILLED SEPARATELY					
COIN AND CURRENCY DEPOSITED		35,695	.0019	67.82	137,900.66
DEPOSIT CORRECTIONS		1	7.500	7.50	15,250.00
RETURNED DEPOSIT/CASH ITEM FEE		1	6.000	6.00	12,200.00
** SUBTOTAL **				254.63	368,765.32
** WIRE TRANSFER SERVICES **					
INCOMING WIRE		1	8.000	8.00	16,266.66
CMOL NON REPETITIVE WIRE		3	8.000	24.00	48,800.00
CMOL REPETITIVE WIRE		2	8.000	16.00	32,533.33
CMOLINE WIRE MAINT		1	10.000	10.00	20,333.33
** SUBTOTAL **				58.00	117,933.32

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ACCOUNT OFFICER LAURIE A ZAPLETAL

67955

GROUP NO.

COMBINED ANALYSIS

BANK SERVICES SECTION	UNITS	RATE	AMOUNT	BAL REQUIRED
** ACH SERVICES **				
ACH RECEIVED CREDIT	133	.120	15.96	32,452.00
ACH RECEIVED DEBIT	25	.190	4.75	9,658.33
ACH MONTHLY MAINTENANCE	2	35.000	70.00	142,333.33
TOTAL ACH ORIGINATED ITEMS	435	.140	60.90	123,830.00
ACH AUTHORIZATION RECORD	1	5.000	5.00	10,166.66
ACH POSITIVE PAY MONTHLY MAINT	4	10.000	40.00	81,333.33
CMOL ACH FILE	4	5.000	20.00	40,666.66
** SUBTOTAL **			216.61	440,440.31
** RECONCILIATION SERVICES **				
SMALL BUSINESS CD-ROM MAINT	4	.000	.00	
SMALL BUSINESS CD-ROM ITEMS	211	.000	.00	
** SUBTOTAL **			.00	.00
** POSPAY/REVERSE POS PAY **				
POS PAY - MAINT	3	35.000	105.00	213,500.00
POS PAY - ITEMS	211	.080	16.88	34,322.66
** SUBTOTAL **			121.88	247,822.66
** INFORMATION SERVICES **				
CMOL CD ACCT MAINT	2	20.000	40.00	81,333.33
CMOL BUSINESS BANKING	4	25.000	100.00	203,333.33
CMOL - CD LOADED ITEMS	151	.000	.00	
CMOL BUSBANK - PD LOADED ITEMS	567	.000	.00	
CMOL BUSBANK - ACCT TRANSFER	1	.000	.00	
CMOL BUSBANK - IMAGE RETRIEVED	11	2.000	22.00	44,733.33
CMOL BUSBANK - IMAGE RETRIEVED	5	.000	.00	
CMOL BUSBANK - STOP PAY-6 MTH	1	.000	.00	
** SUBTOTAL **			162.00	329,399.99
** CASH MANAGEMENT SERVICES **				
ZBA MASTER ACCOUNT MAINTENANCE	1	25.000	25.00	50,833.33
ZBA ACCOUNT MAINTENANCE	2	10.000	20.00	40,666.66
** SUBTOTAL **			45.00	91,499.99
BANK SERVICES			784.85	1,595,861.66
BANK SERVICES:BILL SEPARATE			73.27	

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ACCOUNT OFFICER LAURIE A ZAPLETAL

67955

GROUP NO.

COMBINED ANALYSIS

NET EARNINGS VALUE 90.30-

NET AVAILABLE BALANCE 183,602-

AVERAGE BALANCE DEFICIT 183,602-

***SERVICE CHARGE AMOUNT 90.30
TO ACCOUNT

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ACCOUNT OFFICER LAURIE A ZAPLETAL

67955

GROUP NO. 00001
ACCOUNT NO. 01
COMBINED ANALYSIS
PUBLIC FUND ANALYZED CHECKING

AVERAGE BALANCE SECTION	BALANCE	RATE	AMOUNT	
AVERAGE BALANCE	1,026,744			
LESS: AVERAGE FLOAT	10,824			
AVERAGE COLLECTED BALANCE	1,015,919			
AVG POSITIVE COLLECTED BAL	1,015,919			
LESS: REQUIRED RESERVES	0			
AVG POSITIVE AVAILABLE BAL	1,015,919	.190	158.21	
EARNINGS CREDIT ALLOWANCE			158.21	
BANK SERVICES SECTION	UNITS	RATE	AMOUNT	BAL REQUIRED
** GENERAL BANKING SERVICES **				
MAINTENANCE FEE	1	8.000	8.00	51,368.42
CREDITS POSTED	73	.300	21.90	140,621.05
ITEMS DEPOSITED - BB&T	20	.060	1.20	7,705.26
ITEMS DEPOSITED - IN STATE	183	.060	10.98	70,503.15
ITEMS DEPOSITED - OTHER	29	.060	1.74	11,172.63
CHECKS PAID AND OTHER DEBITS	205	.060	12.30	78,978.94
CHECK CHARGES	1	73.270	73.27	
**BILLED SEPARATELY				
COIN AND CURRENCY DEPOSITED	8,857	.0019	16.83	108,066.31
DEPOSIT CORRECTIONS	1	7.500	7.50	48,157.89
RETURNED DEPOSIT/CASH ITEM FEE	1	6.000	6.00	38,526.31
** SUBTOTAL **			159.72	555,099.96
** WIRE TRANSFER SERVICES **				
INCOMING WIRE	1	8.000	8.00	51,368.42
CMOL NON REPETITIVE WIRE	3	8.000	24.00	154,105.26
CMOL REPETITIVE WIRE	2	8.000	16.00	102,736.84
CMOLINE WIRE MAINT	1	10.000	10.00	64,210.52
** SUBTOTAL **			58.00	372,421.04
** ACH SERVICES **				
ACH RECEIVED CREDIT	73	.120	8.76	56,248.42
ACH RECEIVED DEBIT	20	.190	3.80	24,400.00
ACH MONTHLY MAINTENANCE	1	35.000	35.00	224,736.84
ACH POSITIVE PAY MONTHLY MAINT	1	10.000	10.00	64,210.52
** SUBTOTAL **			57.56	369,595.78

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ACCOUNT OFFICER LAURIE A ZAPLETAL

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GROUP NO. [REDACTED]
ACCOUNT NO. 01 [REDACTED]

COMBINED ANALYSIS
CONTINUED

BANK SERVICES SECTION	UNITS	RATE	AMOUNT	BAL REQUIRED
** RECONCILIATION SERVICES **				
SMALL BUSINESS CD-ROM MAINT	1	.000	.00	
SMALL BUSINESS CD-ROM ITEMS	182	.000	.00	
** SUBTOTAL **			.00	.00
** POSPAY/REVERSE POS PAY **				
POS PAY - MAINT	1	35.000	35.00	224,736.84
POS PAY - ITEMS	182	.080	14.56	93,490.52
** SUBTOTAL **			49.56	318,227.36
** INFORMATION SERVICES **				
CMOL CD ACCT MAINT	1	20.000	20.00	128,421.05
CMOL BUSINESS BANKING	1	25.000	25.00	160,526.31
CMOL - CD LOADED ITEMS	147	.000	.00	
CMOL BUSBANK - PD LOADED ITEMS	381	.000	.00	
CMOL BUSBANK - IMAGE RETRIEVED	11	2.000	22.00	141,263.15
CMOL BUSBANK - IMAGE RETRIEVED	5	.000	.00	
CMOL BUSBANK - STOP PAY-6 MTH	1	.000	.00	
** SUBTOTAL **			67.00	430,210.51
** CASH MANAGEMENT SERVICES **				
ZBA MASTER ACCOUNT MAINTENANCE	1	25.000	25.00	160,526.31
** SUBTOTAL **			25.00	160,526.31
BANK SERVICES			343.57	2,206,080.96
BANK SERVICES:BILL SEPARATE			73.27	
NET EARNINGS VALUE				185.36-
NET AVAILABLE BALANCE	1,190,161-			
AVERAGE BALANCE DEFICIT	1,190,161-			
***SERVICE CHARGE AMOUNT	185.36			

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ACCOUNT OFFICER LAURIE A ZAPLETAL

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GROUP NO. [REDACTED] COMBINED ANALYSIS
ACCOUNT NO. 01 [REDACTED] PUBLIC FUND ANALYZED CHECKING

AVERAGE BALANCE SECTION	BALANCE	RATE	AMOUNT	
AVERAGE BALANCE	0			
LESS: AVERAGE FLOAT	0			
AVERAGE COLLECTED BALANCE	0			
AVG POSITIVE COLLECTED BAL	0			
LESS: REQUIRED RESERVES	0			
AVG POSITIVE AVAILABLE BAL	0	.160	.00	
EARNINGS CREDIT ALLOWANCE			.00	
BANK SERVICES SECTION	UNITS	RATE	AMOUNT	BAL REQUIRED
** GENERAL BANKING SERVICES **				
MAINTENANCE FEE	1	8.000	8.00	61,000.00
CREDITS POSTED	22	.300	6.60	50,325.00
ITEMS DEPOSITED - IN STATE	10	.060	.60	4,575.00
CHECKS PAID AND OTHER DEBITS	30	.060	1.80	13,725.00
** SUBTOTAL **			17.00	129,625.00
** ACH SERVICES **				
ACH RECEIVED DEBIT	3	.190	.57	4,346.25
ACH MONTHLY MAINTENANCE	1	35.000	35.00	266,875.00
TOTAL ACH ORIGINATED ITEMS	435	.140	60.90	464,362.50
ACH POSITIVE PAY MONTHLY MAINT	1	10.000	10.00	76,250.00
CMOL ACH FILE	4	5.000	20.00	152,500.00
** SUBTOTAL **			126.47	964,333.75
** RECONCILIATION SERVICES **				
SMALL BUSINESS CD-ROM MAINT	1	.000	.00	
SMALL BUSINESS CD-ROM ITEMS	21	.000	.00	
** SUBTOTAL **			.00	.00
** POSPAY/REVERSE POS PAY **				
POS PAY - MAINT	1	35.000	35.00	266,875.00
POS PAY - ITEMS	21	.080	1.68	12,810.00
** SUBTOTAL **			36.68	279,685.00

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ACCOUNT NO. 01

COMBINED ANALYSIS
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BANK SERVICES SECTION	UNITS	RATE	AMOUNT	BAL REQUIRED
** INFORMATION SERVICES **				
CMOL BUSINESS BANKING	1	25.000	25.00	190,625.00
CMOL BUSBANK - PD LOADED ITEMS	55	.000	.00	
** SUBTOTAL **			25.00	190,625.00
** CASH MANAGEMENT SERVICES **				
ZBA ACCOUNT MAINTENANCE	1	10.000	10.00	76,250.00
** SUBTOTAL **			10.00	76,250.00
BANK SERVICES			215.15	1,640,518.75
NET EARNINGS VALUE			215.15-	
NET AVAILABLE BALANCE			1,640,518-	
AVERAGE BALANCE DEFICIT			1,640,518-	
***SERVICE CHARGE AMOUNT			215.15	

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GROUP NO. [REDACTED]
ACCOUNT NO. 01 [REDACTED]

COMBINED ANALYSIS
PUBLIC FUND ANALYZED CHECKING

AVERAGE BALANCE SECTION	BALANCE	RATE	AMOUNT	
AVERAGE BALANCE	0			
LESS: AVERAGE FLOAT	0			
AVERAGE COLLECTED BALANCE	0			
AVG POSITIVE COLLECTED BAL	0			
LESS: REQUIRED RESERVES	0			
AVG POSITIVE AVAILABLE BAL	0	.160	.00	
EARNINGS CREDIT ALLOWANCE			.00	

BANK SERVICES SECTION	UNITS	RATE	AMOUNT	BAL REQUIRED
** GENERAL BANKING SERVICES **				
MAINTENANCE FEE	1	8.000	8.00	61,000.00
CREDITS POSTED	30	.300	9.00	68,625.00
ITEMS DEPOSITED - IN STATE	2	.060	.12	915.00
CHECKS PAID AND OTHER DEBITS	21	.060	1.26	9,607.50
COIN AND CURRENCY DEPOSITED	26,838	.0019	50.99	388,798.75
** SUBTOTAL **			69.37	528,946.25
** ACH SERVICES **				
ACH RECEIVED CREDIT	57	.120	6.84	52,155.00
ACH RECEIVED DEBIT	2	.190	.38	2,897.50
ACH AUTHORIZATION RECORD	1	5.000	5.00	38,125.00
ACH POSITIVE PAY MONTHLY MAINT	1	10.000	10.00	76,250.00
** SUBTOTAL **			22.22	169,427.50
** RECONCILIATION SERVICES **				
SMALL BUSINESS CD-ROM MAINT	1	.000	.00	
** SUBTOTAL **			.00	.00
** INFORMATION SERVICES **				
CMOL BUSINESS BANKING	1	25.000	25.00	190,625.00
CMOL BUSBANK - PD LOADED ITEMS	113	.000	.00	
** SUBTOTAL **			25.00	190,625.00

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GROUP NO. [REDACTED]
ACCOUNT NO. 01 [REDACTED]

COMBINED ANALYSIS
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BANK SERVICES SECTION	UNITS	RATE	AMOUNT	BAL REQUIRED
** CASH MANAGEMENT SERVICES **				
ZBA ACCOUNT MAINTENANCE	1	10.000	10.00	76,250.00
** SUBTOTAL **			10.00	76,250.00
BANK SERVICES			126.59	965,248.75
NET EARNINGS VALUE			126.59-	
NET AVAILABLE BALANCE	965,248-			
AVERAGE BALANCE DEFICIT	965,248-			
***SERVICE CHARGE AMOUNT	126.59			

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ACCOUNT OFFICER LAURIE A ZAPLETAL

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GROUP NO. [REDACTED] COMBINED ANALYSIS
ACCOUNT NO. 01 [REDACTED] PUBLIC FUND ANALYZED CHECKING

AVERAGE BALANCE SECTION	BALANCE	RATE	AMOUNT	
AVERAGE BALANCE	396,339			
LESS: AVERAGE FLOAT	0			
AVERAGE COLLECTED BALANCE	396,339			
AVG POSITIVE COLLECTED BAL	396,339			
LESS: REQUIRED RESERVES	0			
AVG POSITIVE AVAILABLE BAL	396,339	.190	61.72	
EARNINGS CREDIT ALLOWANCE			61.72	
<hr/>				
BANK SERVICES SECTION	UNITS	RATE	AMOUNT	BAL REQUIRED
** GENERAL BANKING SERVICES **				
MAINTENANCE FEE	1	8.000	8.00	51,368.42
CHECKS PAID AND OTHER DEBITS	9	.060	.54	3,467.36
** SUBTOTAL **			8.54	54,835.78
** ACH SERVICES **				
ACH RECEIVED CREDIT	3	.120	.36	2,311.57
ACH POSITIVE PAY MONTHLY MAINT	1	10.000	10.00	64,210.52
** SUBTOTAL **			10.36	66,522.09
** RECONCILIATION SERVICES **				
SMALL BUSINESS CD-ROM MAINT	1	.000	.00	
SMALL BUSINESS CD-ROM ITEMS	8	.000	.00	
** SUBTOTAL **			.00	.00
** POSPAY/REVERSE POS PAY **				
POS PAY - MAINT	1	35.000	35.00	224,736.84
POS PAY - ITEMS	8	.080	.64	4,109.47
** SUBTOTAL **			35.64	228,846.31
** INFORMATION SERVICES **				
CMOL CD ACCT MAINT	1	20.000	20.00	128,421.05

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GROUP NO. [REDACTED]
ACCOUNT NO. 01 [REDACTED]

COMBINED ANALYSIS
CONTINUED

BANK SERVICES SECTION	UNITS	RATE	AMOUNT	BAL REQUIRED
CMOL BUSINESS BANKING	1	25.000	25.00	160,526.31
CMOL - CD LOADED ITEMS	4	.000	.00	
CMOL BUSEBANK - PD LOADED ITEMS	18	.000	.00	
CMOL BUSEBANK - ACCT TRANSFER	1	.000	.00	
** SUBTOTAL **			45.00	288,947.36
BANK SERVICES			99.54	639,151.54
NET EARNINGS VALUE			37.82-	
NET AVAILABLE BALANCE	242,811-			
AVERAGE BALANCE DEFICIT	242,811-			
***SERVICE CHARGE AMOUNT	37.82			