

ITEM 10.I.

**MOORPARK CITY COUNCIL
AGENDA REPORT**

TO: Honorable City Council
FROM: Ron Ahlers, Finance Director 
DATE: July 3, 2013 (City Council Meeting of July 17, 2013)
SUBJECT: Consider Resolution Authorizing Certain City Staff to Conduct Treasury Functions with Union Bank

SUMMARY

The City contracts with Union Bank for custodial services in order to hold the U.S. Treasury and Agency securities. The attached form updates the City's authorized signers with Union Bank. Union Bank requires this form be authorized by a resolution of the City Council and signed by the City Clerk.

DISCUSSION

The City Council is authorizing three signers on the Union Bank account: Steven Kueny, City Manager; Ron Ahlers, Finance Director/City Treasurer and Irmina Lumbad, Budget & Finance Manager. The signers are authorized to conduct treasury functions with Union Bank.

FISCAL IMPACT

None.

STAFF RECOMMENDATION

Adopt Resolution No. 2013 - _____ authorizing certain city staff to conduct treasury functions with Union Bank.

Attachment:

Resolution No. 2013 - _____

RESOLUTION NO. 2013-_____

A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF MOORPARK, CALIFORNIA, AUTHORIZING CERTAIN CITY STAFF TO CONDUCT TREASURY FUNCTIONS WITH UNION BANK

WHEREAS, on July 17, 2013, a staff report has been presented to City Council requesting an updated list of authorized signers to conduct treasury functions with Union Bank.

NOW, THEREFORE, THE CITY COUNCIL OF THE CITY OF MOORPARK DOES HEREBY RESOLVE AS FOLLOWS:

SECTION 1. That the individuals(s) listed as an "Authorized Signer" in the "Agree to Terms" section of this Funds Transfer Authorization are hereby authorized to enter into or change any agreement with Union Bank, N.A. ("Bank") relating to and directing the transfer of funds from the account(s) of the Client, whether in person, in writing, or by means of telephone, electronic transmission, or facsimile, and are further authorized to add or delete designated accounts and Authorized Representatives who may initiate funds transfers and receive callbacks and advices.

SECTION 2. That this authorization is in addition to any other authorizations in effect and will remain in force until the Bank receives written notice of revocation at the address and manner designated by the Bank.

SECTION 3. The City Clerk shall certify to the adoption of this resolution and shall cause a certified resolution to be filed in the book of original resolutions.

PASSED AND ADOPTED this 17th day of July, 2013.

Janice S. Parvin, Mayor

ATTEST:

Maureen Benson, City Clerk

Attachment:

Union Bank: Funds Transfer Authorization, Trust Department

DATE
June 24, 2013

1. CLIENT INFORMATION

The undersigned ("Client", "you", or "your") and Union Bank, N.A. ("Bank") agree that the Bank will provide funds transfer services according to the terms of the Master Funds Transfer Agreement and Security Procedures--Trust (Form 02491-TR), and as specified below.

NAME AS IT APPEARS ON YOUR ACCOUNT City of Moorpark			
ADDRESS AS IT APPEARS ON YOUR ACCOUNT 799 Moorpark Avenue		CITY Moorpark	STATE/COUNTRY CA
		ZIP CODE 93021	
TELEPHONE NUMBER 805.517.6249	FACSIMILE NUMBER 805.532.2542		

2. LIST OF ACCOUNTS (Line out all unused lines)

Designate all accounts you wish to use for funds transfers. Does authorization apply to all current and future sub-accounts with the same authorized signers that are created under the umbrella of the current account agreement? Yes No

ACCOUNT NUMBERS	ACCOUNT NAME(S)
6736302140	City of Moorpark

3. FUNDS TRANSFER METHOD

Requests for funds transfers are subject to the security procedures and other terms and conditions set forth in the Master Funds Transfer Agreement and Security Procedures--Trust (Form 02491-TR).

Initiation Type (Select all that apply)

- In Person
 Facsimile
 Written (by Mail)
 SWIFT
 Telephone (Only available to Portal, NICFU\$ and Personal Trust Customers)
- Email (Instructions are received via the Online Business Center or PDF document attached to the email (password protected document preferred data security))

Transmission

Please specify transmission type: **Email or Facsimile**

4. AUTHORIZED REPRESENTATIVES (Line out all unused lines)

Complete this section to designate the individuals who are authorized to initiate funds transfers and receive callbacks. You agree that we may monitor or record telephone conversations with you and your Authorized Representatives.

Authorized Representative (Printed Name)	Signature	Call Back Telephone Number	Individual Dollar Limit If blank, then it's unlimited
1. Steven Kueny	x <i>Steven Kueny</i>	805.517.6212	\$
2. Ron Ahlers	x <i>Ron Ahlers</i>	805.517.6249	\$
3. Irmina Lumbad	x <i>Irmina Lumbad</i>	805.517.6242	\$
4. -----	x -----	-----	\$ -----
5. -----	x -----	-----	\$ -----

If there is only one Authorized Representative, please complete a callback variance letter.

Complete the following section to designate the authorized signers for a Third Party Entity as additional Authorized Representatives to initiate funds transfers and receive callbacks. By designating a Third Party Entity in this section, Client hereby authorizes Bank to refer to the list of authorized signers for the designated Third Party on file with the Bank as of the date of receipt of each funds transfer request.

Name of Designated Third Party Entity, or N/A	Telephone No.:
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City of Moorpark

5. AGREE TO TERMS -- Owners and Individuals With Authority Over Client's Account(s) Should Complete This Section. (Line out all unused lines).

By signing here, each person agrees to the terms and conditions contained in the Master Funds Transfer Agreement and Security Procedures--Trust (Form 02491-TR) and declares under penalty of perjury that the following is true and correct: (1) I am authorized to make this declaration and hold the position (if any) listed next to my name; (2) Each person listed as an Authorized Signer in this "Agree To Terms" section has authority to enter into or change any agreement with the Bank relating to funds transfers on behalf of Client including, but not limited to, authority to add or delete Authorized Representatives and designated accounts; (3) No other person's authorization is necessary to bind the Client for purposes of funds transfers; (4) This authorization supplements all authorizations already in effect; (5) You agree that we may monitor or record our telephone conversations with you and your Authorized Representatives.

PRINTED NAME OF AUTHORIZED SIGNER	SIGNATURE	TITLE
Steven Kueny	<i>Steven Kueny</i>	City Manager
Ron Ahlers	<i>Ron Ahlers</i>	Finance Director/City Treasurer
Irmina Lumbad	<i>Irmina Lumbad</i>	Budget & Finance Manager
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6. RESOLUTION AND CERTIFICATION -- For Secretary of Corporations, Board of Trustees (including for Taft-Hartley Accounts), Unincorporated Associations or Other Entities Only

RESOLVED, that the individual(s) listed as an "Authorized Signer" in the "Agree to Terms" section of this Funds Transfer Authorization are hereby authorized to enter into or change any agreement with Union Bank, N.A. ("Bank") relating to and directing the transfer of funds from the account(s) of the Client, whether in person, in writing, or by means of telephone, electronic transmission, or facsimile, and are further authorized to add or delete designated accounts and Authorized Representatives who may initiate funds transfers and receive callbacks and advices.

FURTHER RESOLVED, that this authorization is in addition to any other authorizations in effect and will remain in force until the Bank receives written notice of revocation at the address and manner designated by the Bank.

CERTIFICATION: I certify that: (1) I am the Secretary or Assistant Secretary of the Client's or Client's Board of Trustees or member of an unincorporated association or other entity; (2) the resolution printed above is a complete and accurate copy of a resolution duly adopted by the Client's Board of Directors or by the Client's members (if unincorporated) or Board of Trustees; (3) the resolution is in full force and has not been revoked or changed.

SIGNATURE--Corporate Secretary or designee from Board of Trustees or member of unincorporated association

DATE

X

NAME--Corporate Secretary or designee from Board of Trustees or member of unincorporated association

UNION BANK, N.A.

OFFICER SIGNATURE

DATE

X

OFFICER NAME