Instructions: Submit this Form to the Chief Financial Officer by email at PublicDeposits@myfloridacfo.com. If (OPTIONAL) (5) is selected, the qualified public depository must provide documentary proof of agency with this Form.

Qualified Public Depository Information (QPD)

Legal Name of QPD:

Home Office City and State:

I,           (Name),  (Title), acknowledge that I am the official custodian of records for the above named QPD, and that the following is a true and correct copy of resolutions adopted by the board of directors of this QPD at a meeting held on the       (MM/DD/YY). These resolutions appear in the minutes of said meeting and have not been modified (check all that apply):

[ ]  (1) The Board of Directors of this QPD affirms that the Contingent Liability Agreement submitted to the Chief Financial Officer , State of Florida (“CFO”), has been formally accepted, constitutes an official record of this QPD, and that this QPD, as a guarantee for its contingent liability, agrees to collectively share in any loss to public depositors caused by the default or insolvency of other QPDs, pursuant to section 280.07, Florida Statutes (F.S.).

[ ]  (2) The Board of Directors of this QPD affirms that the Collateral Control Agreement submitted to the CFO, State of Florida, and all Collateral Control Agreements which this QPD may enter into in order to secure Florida public deposits, have been formally accepted and constitute an official record of this QPD, pursuant to section 280.041, F.S.

[ ]  (3) The Board of Directors of this QPD affirms that the Federal Home Loan Bank Letters of Credit Agreement submitted to the CFO, State of Florida, and all Federal Home Loan Bank Letters of Credit Agreements which this QPD may enter into in order to secure Florida public deposits, have been formally accepted and constitute an official record of this QPD, pursuant to section 280.041, F.S.

[ ]  (4) The Board of Directors of this QPD affirms that the Cash Arrangement Agreement submitted to the CFO, State of Florida, and all Cash Arrangement Agreements which this QPD may enter into in order to secure Florida public deposits, have been formally accepted and constitute an official record of this QPD, pursuant to section 280.041, F.S.

[ ]  (OPTIONAL) (5) The Board of Directors of this QPD elects       (Legal Name) as an operating subsidiary for ownership of collateral securing Florida public deposits. This election meets the definition and conditions set forth in the “Florida Security for Public Deposits Act.” Proof of agency relationship is attached to this resolution, pursuant to section 280.041, F.S., and Rule 69C-2.028, F.A.C.

Each required resolution adopted shall remain in effect until it is replaced with an updated resolution that complies with chapter 280, F.S., and chapter 69C-2, F.A.C., or until this QPD’s contingent liability in the Public Deposits Program expires.

I certify that I have read this Form in its entirety and can attest to the accuracy and truth of the matters.

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Signature of Official Custodian of Records

Name of Official Custodian:

Title of Official Custodian:

Date Signed: