

# Fulton Bank

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Fulton Bank, N.A.

## CERTIFICATE OF DEPOSIT TERMS AND CONDITIONS - SUMMARY

Certificate of Deposit Type: **Negotiated Rate CD**  
 Renewed CD #:

Account No.: <u>                    </u>	Issue Date: <b>04/21/2010</b>	Maturity Date: <b>07/21/2010</b>
Principal Amount: <b>\$ 10,000,000.00</b>	Interest Rate: <b>0.3900 %</b>	Annual Percentage Yield: <b>0.40 %</b>
Registered Holder Name(s) and Address: <b>DAUPHIN COUNTY BUDGET OFFICE INVESTMENT ACCOUNT</b>	Interest Distribution Method: Deposit to Account Savings                      Checking Add to Principal <input checked="" type="checkbox"/> Issue Check	
<b>2 SOUTH SECOND STREET HARRISBURG PA 17101</b>	Minimum Balance: <b>\$100,000.00</b>	Frequency of Payment: <b>At Maturity</b>
Tax ID Number(s): <b>23-6003043</b>		
Individual(s)	Sole Proprietor	Partnership      Corporation      Lodge/Similar Org      Bus. Trust      Ltd. Liability Co.

Combined Statement - Transaction Account Number \_\_\_\_\_

The Issuing Bank (the "Bank") acknowledges receipt, as of the Issue Date set forth above, of the above-described deposit (subject to collection of any funds not paid in cash), in accordance with the above Summary, the accompanying Important Information About Your Certificate of Deposit (the "Important Information"), and (except for a Certificate of Deposit that is an Individual Retirement Account) the attached Rules, including the Arbitration Agreement.

Issuing Bank: Fulton Bank, N.A. Branch Name: Colonial Park Office

By: *Juan Mendez*  
 Authorized Signature

I/We have received a copy of the above Summary, the accompanying Important Information, and (except for a Certificate of Deposit that is an Individual Retirement Account) the attached Rules, including the Arbitration Agreement, and I/We agree, on behalf of all Registered Holders, to the terms and conditions thereof.

**Individuals &**

**Non-Individuals:**

**Sole Proprietorships:**

\_\_\_\_\_  
 Signature (primary)

\_\_\_\_\_  
 Signature (secondary)

\_\_\_\_\_  
 Signature (secondary)

**MICHAEL J YOHE/BUDGET DIRECTOR**  
 Name / Title

**JEFF HASTE/ COUNTY COMMISSION**  
 Name / Title

**JANIS CREASON/ TREASURER**  
 Name / Title

*Michael J. Yohe*  
 Signature  
 *Jeff Haste*  
 Signature  
 *Janis Creason*  
 Signature

Under penalties of perjury, I certify that:

- 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
- 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 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. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because of underreporting interest or dividends on your tax return.

*Michael J. Yohe*  
 Signature (Primary Individual)

**BUDGET DIRECTOR**  
 Title (if Non-Individual)

4/21/2010  
 Date

## CIP Account-Opening Checklist

Date 04/20/2010 Rank # 1057 Department/Branch Colonial Park Office  
 Employee name JASON MEAD Type of account Negotiated Rate Account number 0000000000  
 Name (1) DAUPHIN COUNTY BUDGET OFFICE CD  
 Name (2) INVESTMENT ACCOUNT

EXISTING CUSTOMER #1 <input type="checkbox"/> YES - If the customer is not known by the employee performing the transaction request, the customer's identification must be requested	CUSTOMER ALPHA KEY: _____
EXISTING CUSTOMER #2 <input type="checkbox"/> YES - If the customer is not known by the employee performing the transaction request, the customer's identification must be requested	CUSTOMER ACCOUNT NUMBER: _____

Date of birth (1) \_\_\_\_\_ Date of birth (2) \_\_\_\_\_  
 Address (Individuals - residential address/Businesses or Organizations - principal place of business) (P.O. Boxes are not sufficient)  
2 SOUTH SECOND STREET HARRISBURG PA 17101

Taxpayer identification number (1) 23-8003049 Taxpayer identification number (2) \_\_\_\_\_

For entities that do not yet have a taxpayer identification number (TIN), require the customer to have applied for a TIN and obtain a copy of the application or other verification before opening the accounts.

**DOCUMENTS RELIED ON**

Individual (1) <input type="checkbox"/> Type of ID _____ <input type="checkbox"/> State of issuance and ID numbers _____ <input type="checkbox"/> Issue date _____ <input type="checkbox"/> Expiration date _____	Second firm if Individual is not able to produce the required verification document <input type="checkbox"/> Type of ID _____ <input type="checkbox"/> State of issuance and ID numbers _____ <input type="checkbox"/> Issue date _____ <input type="checkbox"/> Expiration date _____
Individual (2) <input type="checkbox"/> Type of ID _____ <input type="checkbox"/> State of issuance and ID numbers _____ <input type="checkbox"/> Issue date _____ <input type="checkbox"/> Expiration date _____	Second firm if Individual is not able to produce the required verification document <input type="checkbox"/> Type of ID _____ <input type="checkbox"/> State of issuance and ID numbers _____ <input type="checkbox"/> Issue date _____ <input type="checkbox"/> Expiration date _____

**DOCUMENTS RELIED ON - Non-Individual Legal Entities**

Corporations <input type="checkbox"/> Certified Copy of Corporate Resolution <input type="checkbox"/> Articles of Incorporation Date of recording _____ State of recording _____	Partnership <input type="checkbox"/> Partnership Certification and Authorization <input type="checkbox"/> Partnership Agreement (if written agreement exists) Date of agreement _____ <input type="checkbox"/> Pictorial Name Registration (if applicable) Date of registration _____ State or County _____
LLC (Limited Liability Company) <input type="checkbox"/> LLC Certificate and Authorization <input type="checkbox"/> Registration or Filing with the charging state Date of recording _____ State of recording _____	Trusts <input type="checkbox"/> Trust Certificate and Authorization (Business Trust) <input type="checkbox"/> Trust Agreement or Indenture (Personal Trust) Date of agreement _____
Estates <input type="checkbox"/> Original certificate of letters testamentary or letters of administration Date of issuance _____ State or County _____	Unincorporated Associations <input type="checkbox"/> Unincorporated Association Resolution <input type="checkbox"/> Bylaws, Charter or Organization Documents
Non-Individual Legal Entities Presenting Higher Risk Additional Information on Individual Name _____ Address _____ TIN _____ Date of birth _____ Type of ID _____ State of issuance and ID numbers _____ Issue date _____ Expiration date _____	Non-Individual Legal Entities Presenting Higher Risk Additional Information on Individual Name _____ Address _____ TIN _____ Date of birth _____ Type of ID _____ State of issuance and ID numbers _____ Issue date _____ Expiration date _____

**Non-Documentary Verification**

In certain circumstances it may not be possible to obtain photo identification. In these instances a minimum of two types of the following items may be used to verify identity:

Individual (1) Business entity <input type="checkbox"/> Independent verification through trusted third party, credit bureaus or public databases (Example - ChexSystems) <input type="checkbox"/> Contacting the customer via telephone or mail <input type="checkbox"/> Verifying references with other financial institutions <input type="checkbox"/> Obtaining financial statements, paystubs, W-2's and/or tax returns <input type="checkbox"/> Obtaining utility statements (Example - electric, gas or water) as a secondary means of verifying an address <input type="checkbox"/> Public records of ownership of the borrower's principal residence The above checked items were used to verify the identity of the applicant. Processor Name _____ Date _____	Individual (2) <input type="checkbox"/> Independent verification through trusted third party, credit bureaus or public databases (Example - ChexSystems) <input type="checkbox"/> Contacting the customer via telephone or mail <input type="checkbox"/> Verifying references with other financial institutions <input type="checkbox"/> Obtaining financial statements, paystubs, W-2's and/or tax returns <input type="checkbox"/> Obtaining utility statements (Example - electric, gas or water) as a secondary means of verifying an address <input type="checkbox"/> Public records of ownership of the borrower's principal residence The above checked items were used to verify the identity of the applicant. Processor Name _____ Date _____
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Chexsystems/Qualific  
 Verification completed  Yes  No

# Fulton Bank

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## RESOLUTION OF UNINCORPORATED ASSOCIATION

I, the undersigned, certify that I am Secretary of DAUPHIN COUNTY BUDGET OFFICE (the "Association"), an unincorporated association organized under the laws of PENNSYLVANIA with its principal office located at 2 SOUTH SECOND STREET, HARRISBURG PA 17101, and further certify that at a meeting of the Association, duly called and held on \_\_\_\_\_, the following resolutions were duly adopted and they have not been modified or rescinded, and are now in full force and effect, and that the same are not in contravention of or in conflict with the charter or bylaws of the Association and are in accordance therewith and pursuant thereto:

**"RESOLVED:**

1. Fulton Bank, N.A., a national banking association, (the "Bank") is hereby designated a depository of the Association and there may be deposited to its credit in one or more accounts with the Bank, either at its main office or any of its branches, any monies, checks or other instruments of the Association, subject to the rules and regulations established from time to time by the Bank. Any other property of the Association may be deposited with the Bank for safekeeping, custody or other purposes. Items for deposit, collection or discount may be endorsed by any person authorized to sign checks, or endorsements thereof may be made in writing or by a stamp and without designation of the person so endorsing.

2. Any one of the following persons:

\* MICHAEL J YOHE/BUDGET DIRECT, JEFF HASTE/COMMISSIONER, JANIS CREASON/TREASURER, , , is authorized, on behalf of the Association and in its name, in accordance with the rules and regulations applicable to such account: (a) to sign checks, drafts, notes, acceptances and other instruments and orders or otherwise arrange for the payment of money or for the withdrawal or delivery of funds or other property at any time held by the Bank for the account of the Association and to receive any thereof, and to issue written, oral, or mechanical instructions for the conduct of any account of the Association with the Bank; (b) to accept drafts, and other instruments payable at the Bank, and to waive demand, protest, and notice of protest or dishonor of any instrument made, drawn, or endorsed by the Association; (c) to endorse, negotiate and receive, or authorize the payment of, the proceeds of, any negotiable or other instruments or orders for the payment of money payable to or belonging to the Association; (d) to communicate instructions or orders by telephonic, electronic or other means, to make funds transfers, wire transfers, automated clearing house entries and payment orders of any nature for, on behalf of or in the name of the Association and to delegate such authority from time to time by appointment and removal of such other persons who may conduct such communications; and (e) to enter into agreements with Bank for, on behalf of or in the name of the Association relating to any of the foregoing, a safe deposit box rental/lease, or any cash management, information, investment, financial or similar services.

If the foregoing paragraph (or any other document or instrument provided by the Association to the Bank) indicates that the Association may conduct any of the banking or financial transactions identified above only upon the signature of two or more authorized persons (a "Multiple Signature Requirement"), it is expressly understood and agreed that such Multiple Signature Requirement is a matter of the Association's

**Internal controls only and that no Multiple Signature Requirement shall be binding upon the Bank. The Bank shall have no obligation to enforce, support, monitor or accept instructions concerning Multiple Signature Requirements and the Bank shall have no liability for any losses, liabilities or damages arising out of banking or financial transactions that are undertaken in violation of any Multiple Signature Requirement.**

3. That the Association also requests, authorizes and directs the Bank to accept and pay out of the monies now or hereafter on deposit with the Bank to the credit of the Association, any and all checks, drafts or other orders drawn upon the Bank in the name of the Association bearing the facsimile signatures of the persons now or hereafter authorized to sign checks, drafts or other orders on behalf of the Association, no matter by whom or how said facsimile signature(s) have been impressed thereon, the said facsimile signature(s) to be in the form of a specimen now or hereafter furnished to the Bank.
4. The Bank may follow all such instructions, and may honor all such checks and other instruments for the payment or delivery of money or property when signed or impressed as authorized above, including any payable to the Bank or to any signer or other officer or employee of the Association or to cash or to bearer, and may receive the same in payment of or as security for the personal indebtedness of any signer or other member, officer or employee of the Association or other person to the Bank or in any transaction whether or not known to be for the personal benefit of any such person, without inquiry as to the circumstances of their issue or the disposition of their proceeds, and without liability to the Association, and without any obligation upon the Bank to inquire whether the same be drawn or required for the business or benefit of the Association.
5. Any \_\_\_\_\_ of the following persons:

\* \_\_\_\_\_  
is/are hereby authorized and empowered, at any time or times, on behalf of the Association and in its name, and upon such terms as such person or persons may determine: (a) to borrow or obtain other financial accommodations from, and engage in any other banking transactions with the Bank on a secured or unsecured basis; (b) to make, execute, endorse, accept and deliver notes, drafts, bills of exchange, acceptances, evidences of indebtedness and other instruments, and security and other agreements of the Association in or in connection with any transaction; (c) to secure any liability of the Association to the Bank by granting a security interest in and by pledge, mortgage or assignment, originally and in addition and in substitution, and delivery of any or all of the presently owned or hereafter acquired real, personal, tangible and intangible property of the Association; and (d) to sell, exchange, purchase or otherwise deal in any such property and to deliver and accept delivery of the same, and the proceeds thereof, and to execute and deliver any agreement, endorsement, deed, transfer or assignment in connection therewith, to or from or through the Bank.




6. Any action heretofore taken by any member, officer or employee of the Association with respect to any of the matters stated above is hereby ratified and confirmed.
7. The Secretary of the Association is hereby directed to certify to the Bank a copy of these resolutions and the name of the present incumbents of the offices or positions, if any, referred to herein, and to further certify from time to time hereafter the names of any successors to the present incumbents of said offices or positions, together with specimens of their respective

signatures and facsimile signatures, and the Bank is hereby authorized, empowered and directed to rely upon any such certificate, unless and until the same shall have been formally modified or rescinded by a subsequent certificate of the Association actually received by the Bank.

8. Such authority in the Bank shall continue until the Bank has actually received a certified copy of a subsequent resolution of the Association modifying or rescinding any or all of such resolutions shall have been actually received by the Bank."

\* Specify whether the signature of one or more authorized persons are required, and in designating authorized persons, if such persons are officers of the Association, use titles rather than names.

I further certify that following person(s) are officer(s) of the Association in the capacity set forth opposite his, her or their respective name(s) (list those officers authorized under paragraphs 2 and 5 above):

Name & Title	Signature	Facsimile Signature (if any)
<u>MICHEAL J YOHE/BUDGET DIRECT</u>		_____
<u>JEFF HASTE/ COUNTY COMMISSIONER</u>		_____
<u>JANIS CREASON/ TREASURER</u>		_____
_____	_____	_____
_____	_____	_____

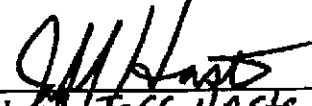
WITNESS my hand as of this 21ST day of APRIL, 2010.

  
Secretary/Chief Clerk

If the person signing the foregoing certificate is authorized to sign and act as above stated without other countersignature, then the President or Vice President or some other principal officer of the Association must sign the following confirmation:

I, Jeff Haste, CHAIRMAN (name and title) of the Association, do hereby certify that the Chief Clerk (title such as Secretary) of the Association is duly authorized to sign and act as above without other signature or countersignature.

WITNESS my hand as of this 21ST day of APRIL, 2010.

  
Name: Jeff HASTE  
Title: CHAIRMAN