



Master Services Agreement

Customer Tax Identification Number: 486033520

I, Bryan Kidney, HEREBY CERTIFY that I am Bryan Kidney Finance Director of CITY OF LAWRENCE ("Customer"), an entity organized under the laws of the State of Kansas. I further certify that I have full power and lawful authority to execute this Master Services Agreement ("MSA") on behalf of Customer. I further certify that Customer has taken all action required by its resolutions and other organizational documents, records or agreements to authorize the individuals listed below to act on behalf of Customer in all transactions contemplated under this MSA. Customer shall not be bound by the terms and conditions for those specific services described, to the extent Customer elects not to use such service(s). Customer hereby agrees as follows:

DEPOSIT ACCOUNTS:

1. U.S. Bank National Association ("Bank") is hereby designated as Customer's banking depository. Customer has received a copy of the deposit account terms and conditions and agrees that such terms shall govern the deposit account services provided by Bank. All transactions between Customer and Bank involving any of Customer's accounts at Bank will be governed by the deposit account terms and conditions, this MSA and other disclosures provided to Customer. Customer agrees to provide Bank with a copy of documents requested by Bank.

2. Any one (1) of the persons whose names and signatures appear in Appendix A (individually, an "Account Signer") are hereby authorized to open, add, modify, or close accounts in the name of Customer or its subsidiaries or affiliates, or if applicable, as an agent for another entity, and to sign, on behalf of Customer, its subsidiaries or affiliates or as an agent for another entity, checks, drafts or other orders for the payment, transfer or withdrawal of any of the funds or other property of Customer, whether signed, manually or by use of a facsimile or mechanical signature or otherwise authorized, including those payable to the individual order of the person or persons signing or otherwise authorizing the same and including also those payable to the Bank or to any other person for application, or which are actually applied to the payment of any indebtedness owing to the Bank from the person or persons who signed such checks, drafts or other withdrawal orders or otherwise authorized such withdrawals; and are also authorized to endorse for deposit, payment or collection any check, bill, draft or other instrument made, drawn or endorsed to the accounts governed by this MSA for deposit into these accounts. The authorization contained in the preceding sentence includes transfers of funds or other property of Customer to accounts outside of those accounts Customer maintains at Bank. Any one of the Contract Signers (as defined below) is also authorized to execute any documentation that Bank may require to add or delete Account Signers.

3. Unless Customer otherwise advises Bank in writing and Bank has a reasonable opportunity to act on such writing, the Account Signers listed in Appendix A will be Account Signers on any future deposit accounts that Customer maintains with Bank.

4. Customer acknowledges and agrees that Bank is not required to obtain the consent of or otherwise contact an Account Signer for transactions other than those listed in paragraph 2 above, including, but not limited to, transfers between accounts Customer maintains at Bank, advances on loans Customer has with Bank and transfers to pay down loans Customer has with Bank.

TREASURY MANAGEMENT SERVICES:

5. Bank's treasury management services ("Treasury Management Service(s)") are described in the U.S. Bank Services Terms and Conditions, any supplements thereto, any implementation documents, user manuals, operating guides and other related documentation and disclosures provided by Bank, and any addendum to any of the foregoing (collectively the "Services Agreement"). Customer has received and reviewed the Services Agreement and desires to use one or more of the Treasury Management Services.

6. Any one (1) of the persons whose names and signatures appear in Appendix B (individually, a "Treasury Management Signer") are empowered in the name of and on behalf of the Customer to enter into all Treasury Management Services transactions contemplated in the Services Agreement including, but not limited to, selecting Treasury Management Services, appointing agents to act on behalf of Customer in the delivery of Treasury Management Services, signing additional documentation necessary to implement the Treasury Management Services and giving Bank instructions with regard to any Treasury Management Service, including without limitation, wire transfers, ACH transfers, and any other electronic or paper transfers from or to any account Customer may maintain with Bank. Bank may, at its discretion, require Customer to execute additional documentation to implement or amend certain Treasury Management Services. In such cases, documentation necessary to implement or amend such Services shall be signed by a Treasury Management Signer. Customer further acknowledges and agrees that Bank may implement or amend Services based on the verbal, written, facsimile, voice mail, email or other electronically communicated instructions that it believes in good faith to have been received from a Treasury Management Signer. Any one of the Contract Signers (as defined below) is also authorized to execute any documentation that Bank may require to add or delete Treasury Management Signers.

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MONEY CENTER AND SAFEKEEPING SERVICES:

7. Any one (1) of the persons referenced in Appendix M (individually, a "Money Center Signer") are each authorized and empowered in the name of and on behalf of the Customer to transact any and all depository and investment business through the Bank's Money Center division (the "Money Center") and any securities custodial business through the Bank's Safekeeping Department (the "Safekeeping Department"), which such person may at any time deem to be advisable, including, without limiting the generality of the foregoing, selecting any services that may from time to time be offered by the Money Center or the Safekeeping Department (collectively referred to herein as "Money Center Services" and "Safekeeping Services", respectively), appointing additional Money Center Signers or agents to act on behalf of Customer with respect to Money Center Services and Safekeeping Services, signing additional documentation necessary to implement the Money Center Services and Safekeeping Services and giving Bank instructions with regard to any Money Center Service and Safekeeping Service. Customer has received and reviewed the Services Agreement and may use one or more of the Money Center Services or Safekeeping Services from time to time. Bank may, at its discretion, require Customer to execute additional documentation to implement or amend certain Money Center Services or Safekeeping Services. In those cases, the required documentation shall be signed by a Money Center Signer. Customer further acknowledges and agrees that Bank may take any action with respect to any Money Center Services or Safekeeping Services requested by a Money Center Signer based on the verbal, written, facsimile, voice mail, email or other electronically communicated instructions that Bank believes in good faith to have been received from a Money Center Signer. Any one of the Money Center Signers is also authorized to execute any documentation that Bank may require to add or delete Money Center Signers.

FOREIGN EXCHANGE:

8. Bank is authorized by Customer to enter into foreign exchange transactions. Customer has received a copy of the Services Agreement and agrees that the terms contained in the Services Agreement, this MSA and other disclosures provided to Customer shall govern the foreign exchange services provided by Bank. Customer agrees to provide Bank with a copy of documents requested by Bank.

FOREIGN CURRENCY ACCOUNTS:

9. Bank is hereby designated as Customer's banking depository for one or more Foreign Currency Account(s) (the "Foreign Account(s)"). Any one (1) of the persons whose names and signatures appear in Appendix D (individually, a "Foreign Currency Account Signer") are hereby authorized to open, add, modify, or close any Foreign Account(s) in the name of Customer or its subsidiaries or affiliates and to make, on behalf of Customer, orders for payment or transfer of any of the funds or other property of Customer, whether signed, manually or by use of a facsimile or mechanical signature or otherwise authorized, including those payable to the individual order of the person or persons signing or otherwise authorizing the same. Customer hereby expressly authorizes and directs Bank to accept written and oral instructions any payment orders, by telephone or otherwise, consistent with the Services Agreement. Customer has received a copy of the Services Agreement and agrees that the terms contained in the Services Agreement, this MSA and other disclosures provided to Customer shall govern the Foreign Accounts. Any one of the Contract Signers (as defined below) is also authorized to execute any documentation that Bank may require to add or delete Foreign Currency Account Signers.

OTHER SERVICES:

10. A Contract Signer is authorized and empowered on behalf of Customer to transact any and all other depository and investment business with and through Bank, and, in reference to any such business, to make any and all agreements and to execute and deliver to Bank any and all contracts and other writings which such person may deem to be necessary or desirable.

GENERAL:

11. All Account Signers, Treasury Management Signers, Foreign Currency Account Signers and/or Money Center Signers (whether designated in this MSA or in a prior document [for example, a Certificate of Authority or a Treasury Management Services Agreement] executed by Customer) will remain in place until Bank receives written notice of any change and has a reasonable time to act upon Customer's written notice.

12. Any and all transactions by or in behalf of Customer with the Bank prior to the adoption of this MSA (whether involving deposits, withdrawals, Treasury Management Services, or otherwise) are in all respects ratified, approved and confirmed.

13. Customer agrees to furnish Bank with the names and signatures (either actual or any form or forms of facsimile or mechanical signatures adopted by the person authorized to sign) of the persons who presently are Account Signers, Treasury Management Signers, Foreign Currency Account Signers and/or Money Center Signers. Bank shall be indemnified and saved harmless by Customer from any claims, demands, expenses, loss or damage resulting from or growing out of honoring or relying on the signature or other authority (whether or not properly used and, in the case of any facsimile signature, regardless of when or by whom or by what means such signature may have been made or affixed) of any officer or person whose name and signature was so certified, or refusing to honor any signature or authority not so certified.



Master Services Agreement

Each of the undersigned (individually and collectively, the "Contract Signers") certifies that, based on his or her review of Customer's books and records, Customer has, and at the time of adoption of this MSA had, full power and lawful authority to adopt the MSA and to confer the powers herein granted to the persons named, and that such persons have full power and authority to exercise the same.

Each of the Contract Signers further certifies that he or she has the full power and lawful authority to execute this MSA on behalf of Customer, its subsidiaries and affiliates, or if applicable, as an agent for another entity who has entered into an agreement with Customer authorizing Customer to act on such entity's behalf.

Each of the Contract Signers further certifies that the Account Signers, Treasury Management Signers, Foreign Currency Account Signers and/or Money Center Signers have been duly elected to and now hold the offices of Customer set opposite their respective names, and the signatures appearing opposite their names are the authentic, official signatures of the said signer.

The undersigned Contract Signers have executed this MSA as of the 31 day of May, 20 15.

Contract Signer Signature: Bryan Kidney
Print Name: Bryan Kidney
Print Title: FINANCE DIRECTOR

Contract Signer Signature: Diane Stoddard
Print Name: Diane Stoddard
Print Title: _____

Contract Signer Signature: Casey Toomay
Print Name: Casey Toomay
Print Title: _____

Contract Signer Signature: _____
Print Name: _____
Print Title: _____

Contract Signer Signature: _____
Print Name: _____
Print Title: _____

Contract Signer Signature: _____
Print Name: _____
Print Title: _____

Contract Signer Signature: _____
Print Name: _____
Print Title: _____

Contract Signer Signature: _____
Print Name: _____
Print Title: _____

Updated

For Internal Use Only:
Review _____ Validation Method _____ TL Review _____ Imaged _____



Master Services Agreement 1

Contract Signer(s) Change

Customer Information

Customer Name: CITY OF LAWRENCE
 Tax Identification Number on Current MSA 48-6033520

Contract Signer Changes Related to the Original MSA Dated:

The undersigned Contract Signer certifies that, based on his or her review of Customer's books and records, Customer has full power and lawful authority to make this change to the Contract Signer(s) and to confer the powers herein granted to the persons named, and that the undersigned Contract Signer has full power and authority to exercise the same.

The undersigned Contract Signer further certifies that the newly appointed Contract Signers have been duly elected to and now hold the offices of Customer set opposite their respective names, and the signatures appearing opposite their names are the authentic, official signatures of the said Contract Signer.

Add Contract Signer (s)

Print Contract Signer Name	Print Contract Signer Title	Contract Signer Signature
DANIELLE BUSCHKOETTER	Interim Finance Director	

Delete Contract Signer (s)

Delete Contract Signer Name:
BRYAN KIDNEY

Existing Contract Signer(s) other than those new Contract Signers listed above (list name(s) only, no specimen signatures are needed)

<u>DIANE STODDARD</u>	<u>CASEY TOOMAY</u>	<u>THOMAS M. MARKUS</u>

Contract Signer Signature: Date: 9/5/18
 Print Name: Casey N Toomay
 Print Title: Asst. City Manager
 CTN: SSW-2654

For Internal Use Only:

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Master Services Agreement 1

Contract Signer(s) Change

Customer Information

Customer Name: CITY OF LAWRENCE

Contract Signer Changes Related to the Original MSA Dated: 5-21-15

Tax Identification Number on Current MSA 48-6033520

The undersigned Contract Signer certifies that, based on his or her review of Customer's books and records, Customer has full power and lawful authority to make this change to the Contract Signer(s) and to confer the powers herein granted to the persons named, and that the undersigned Contract Signer has full power and authority to exercise the same.

The undersigned Contract Signer further certifies that the newly appointed Contract Signers have been duly elected to and now hold the offices of Customer set opposite their respective names, and the signatures appearing opposite their names are the authentic, official signatures of the said Contract Signer.

Add Contract Signer (s)

Print Contract Signer Name	Print Contract Signer Title	Contract Signer Signature
THOMAS M. MARKUS	CITY MANAGER	

updated

Delete Contract Signer (s)

Delete Contract Signer Name: _____

Existing Contract Signer(s) other than those new Contract Signers listed above (list name(s) only, no specimen signatures are needed)

BRYAN KIDNEY	DIANE STODDARD	CASEY TOOMAY

Contract Signer Signature

Date: 05/04/2014

Print Name: BRYAN KIDNEY
Print Title: FINANCE DIRECTOR

CTN: CSS-15308

For Internal Use Only:

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Appendix A-1

New Account/Change in Authorized Account Signer(s)

Customer Information

Customer Name: CITY OF LAWRENCE

New Account

Tax Identification Number: 48-6033520

Change in Authorized Account Signers

Account Information

Account Name	Account Number	Tax Identification Number
CITY OF LAWRENCE GENERAL ACCOUNT	145571242844	48-6033520
CITY OF LAWRENCE HEALTHCARE SERVICES ACCOUNT	145571237737	48-6033520

Authorized Account Signers

Add Authorized Account Signer(s):

Name	Title	Specimen Signature
DANIELLE BUSCHKOETTER	Interim Finance Director	

Delete Authorized Account Signer(s) (list name(s) only):

BRYAN KIDNEY

Existing Authorized Account Signer(s) other than those new Authorized Account Signers listed above (list name(s) only, no specimen signatures are needed)

DIANE STODDARD

CASEY TOOMAY

THOMAS MARKUS

The Signer listed below represents and warrants to the Bank that: (i) the signatures listed above are the true and authentic signatures of the additional Authorized Account Signer(s); (ii) that each Customer listed above has taken all action required by its respective organizational documents to appoint the additional Authorized Account Signer(s) and to delete any Existing Authorized Account Signer(s); and (iii) he/she is authorized to complete this Appendix A-1 for each Customer listed above.

Account Signer may execute this Appendix A-1 to add an account(s) for Customer if the Existing Authorized Signers remain the same. Otherwise, this Appendix A-1 must be executed by a Contract Signer. This Appendix A-1 becomes effective only after U.S. Bank receives and has time to modify its records to reflect the changes noted herein.

Signer Signature: Casey N Toomay

Print Title: Asst. City Manager

Print Name: Casey N Toomay

Date: 9/5/18

CTN SSW-2654

For Internal Use Only:

Authorized Signers are related to the Master Services Agreement dated: _____

Review _____ Validation Method _____ TL Review _____ Imaged _____



Appendix A-1

New Account/Change in Authorized Account Signer(s)

Customer Information

Customer Name: CITY OF LAWRENCE New Account
 Tax Identification Number: 48-6033520 Change in Authorized Account Signers

Account Information

Account Name	Account Number	Tax Identification Number
CITY OF LAWRENCE GENERAL ACCOUNT	145571242844	486033520
CITY OF LAWRENCE HEALTHCARE SERVICES ACCOUNT	145571237737	486033520

Authorized Account Signers

Add Authorized Account Signer(s):

Name	Title	Specimen Signature
THOMAS MARKUS	CITY MANAGER	

Updated

Delete Authorized Account Signer(s) (list name(s) only):

Existing Authorized Account Signer(s) other than those new Authorized Account Signers listed above (list name(s) only, no specimen signatures are needed)

BRYAN KIDNEY	DIANE STODDARD	CASEY TOOMEY

The Signer listed below represents and warrants to the Bank that: (i) the signatures listed above are the true and authentic signatures of the additional Authorized Account Signer(s); (ii) that each Customer listed above has taken all action required by its respective organizational documents to appoint the additional Authorized Account Signer(s) and to delete any Existing Authorized Account Signer(s); and (iii) he/she is authorized to complete this Appendix A-1 for each Customer listed above.

Account Signer may execute this Appendix A-1 to add an account(s) for Customer if the Existing Authorized Signers remain the same. Otherwise, this Appendix A-1 must be executed by a Contract Signer. This Appendix A-1 becomes effective only after U.S. Bank receives and has time to modify its records to reflect the changes noted herein.

Signer Signature: Print Title: FINANCE DIRECTOR
 Print Name: Bryan Kidney Date: 6/15/14

For Internal Use Only:
 Authorized Signers are related to the Master Services Agreement dated: _____
 Review _____ Validation Method _____ TL Review _____ Imaged _____

System meet remarks



Appendix A-1

New Account/Change in Authorized Account Signer(s)

CTN

For Internal Use Only:

Authorized Signers are related to the Master Services Agreement dated: _____

Review _____ Validation Method _____ TL Review _____ Imaged _____



Appendix A-1

New Account/Change in Authorized Account Signer(s)

Customer Information

Customer Name: CITY OF LAWRENCE

New Account

Tax Identification Number: 486033520

Change in Authorized Account Signers

Account Information

Account Name	Account Number	Tax Identification Number
CITY OF LAWRENCE	145571242844	486033520
CITY OF LAWRENCE	145571237737	486033520
CITY OF LAWRENCE	145571237729	486033520 - Closed

Authorized Account Signers

Add Authorized Account Signer(s):

Name	Title	Specimen Signature
Diane Stoddard		<i>Diane Stoddard</i>

Delete Authorized Account Signer(s) (list name(s) only):

DAVID CORLISS

updated

Existing Authorized Account Signer(s) other than those new Authorized Account Signers listed above (list name(s) only, no specimen signatures are needed)

CASEY TOOMAY

BRYAN KIDNEY

The Signer listed below represents and warrants to the Bank that: (i) the signatures listed above are the true and authentic signatures of the additional Authorized Account Signer(s); (ii) that each Customer listed above has taken all action required by its respective organizational documents to appoint the additional Authorized Account Signer(s) and to delete any Existing Authorized Account Signer(s); and (iii) he/she is authorized to complete this Appendix A-1 for each Customer listed above.

Account Signer may execute this Appendix A-1 to add an account(s) for Customer if the Existing Authorized Signers remain the same. Otherwise, this Appendix A-1 must be executed by a Contract Signer. This Appendix A-1 becomes effective only after U.S. Bank receives and has time to modify its records to reflect the changes noted herein.

Signer Signature: *Bry-Kidney*

Print Title: *Finance Director*

Print Name: *Bryan Kidney*

Date: *5/21/2015*

CTN

For Internal Use Only:

Authorized Signers are related to the Master Services Agreement dated: _____

Review _____ Validation Method _____ TL Review _____ Imaged _____



Appendix B-1

Change in Authorized Treasury Management Signer(s)

Customer Information

Customer Name: City of Lawrence

Tax Identification Number: 48-6033620

Authorized Treasury Management Signers:

Add Authorized Treasury Management Signer(s):

Name	Title	Specimen Signature
Kristen Webb	Utility Billing Manager	<i>Kristen Webb</i>

Delete Authorized Treasury Management Signer(s) (list name(s) only):

Cindy Naff		

Existing Authorized Treasury Management Signer(s) other than those new Authorized Treasury Management signers listed above (list name(s) only, no specimen signatures are needed)

Danielle Buschkoetter	Casey Toomay	Thomas M Markus
Diane Stoddard		

The Contract Signer listed below further represents and warrants to the Bank that the signatures listed above are the true and authentic signatures of the Authorized Treasury Management Signer(s) and that Customer has taken all action required by its organizational documents to appoint the Authorized Treasury Management Signer(s). This Appendix B-1 becomes effective only after U.S. Bank receives and has time to modify its records to reflect the changes noted herein.

Contract Signer Signature: *Danielle Buschkoetter* Print Title: *Interim Finance Director*
 Print Name: *Danielle Buschkoetter* Date: *10-9-2018*

For Internal Use Only:
 Authorized Signers are related to the Master Services Agreement dated: _____
 Review _____ Validation Method _____ TL Review _____ Imaged _____



Appendix B-1

Change in Authorized Treasury Management Signer(s)

Customer Information

Customer Name: CITY OF LAWRENCE

Tax Identification Number: 48-6033520

Authorized Treasury Management Signers:

Add Authorized Treasury Management Signer(s):

Name	Title	Specimen Signature
DANIELLE BUSCHKOETTER	Interim Finance Director	

Delete Authorized Treasury Management Signer(s) (list name(s) only):

BRYAN KIDNEY		

Updated

Existing Authorized Treasury Management Signer(s) other than those new Authorized Treasury Management signers listed above (list name(s) only, no specimen signatures are needed)

CINDY NAFF	CASEY TOOMAY	THOMAS M MARCUS
DIANE STODDARD		

The Contract Signer listed below further represents and warrants to the Bank that the signatures listed above are the true and authentic signatures of the Authorized Treasury Management Signer(s) and that Customer has taken all action required by its organizational documents to appoint the Authorized Treasury Management Signer(s). This Appendix B-1 becomes effective only after U.S. Bank receives and has time to modify its records to reflect the changes noted herein.

Contract Signer Signature: Casey N. Toomay Print Title: Asst. City Manager
 Print Name: Casey N Toomay Date: 9/5/18

For Internal Use Only:
 Authorized Signers are related to the Master Services Agreement dated: _____
 Review _____ Validation Method _____ TL Review _____ Imaged _____



Appendix B-1

Change in Authorized Treasury Management Signer(s)

Customer Information

Customer Name: CITY OF LAWRENCE

Tax Identification Number: 48-6033520

Authorized Treasury Management Signers:

Add Authorized Treasury Management Signer(s):

Name	Title	Specimen Signature
KRISTEN WEBB	CUSTOMER SERVICE SUPERVISOR	<i>Kristen Webb</i>

Delete Authorized Treasury Management Signer(s) (list name(s) only):

CINDY NAFF		

Existing Authorized Treasury Management Signer(s) other than those new Authorized Treasury Management signers listed above (list name(s) only, no specimen signatures are needed)

BRYAN KIDNEY	CASEY TOOMAY	DIANE STODDARD
THOMAS MARKUS		

The Contract Signer listed below further represents and warrants to the Bank that the signatures listed above are the true and authentic signatures of the Authorized Treasury Management Signer(s) and that Customer has taken all action required by its organizational documents to appoint the Authorized Treasury Management Signer(s). This Appendix B-1 becomes effective only after U.S. Bank receives and has time to modify its records to reflect the changes noted herein.

Contract Signer Signature: *Bryan Kidney* Print Title: *Finance Director*
 Print Name: Bryan Kidney Date: 5/15/2017

For Internal Use Only:
 Authorized Signers are related to the Master Services Agreement dated: _____
 Review _____ Validation Method _____ TL Review _____ Imaged _____



Appendix B-1

Change in Authorized Treasury Management Signer(s)

Customer Information

Customer Name: CITY OF LAWRENCE Tax Identification Number: 486033520

Authorized Treasury Management Signers:

Add Authorized Treasury Management Signer(s):

Name	Title	Specimen Signature

Delete Authorized Treasury Management Signer(s) (list name(s) only):

MARK HEIM

Updated

Existing Authorized Treasury Management Signer(s) other than those new Authorized Treasury Management signers listed above (list name(s) only, no specimen signatures are needed)

Cindy Naff	Casey Toomay	Thomas Marcus
Bryan Kidney	Diane Stoddard	

The Contract Signer listed below further represents and warrants to the Bank that the signatures listed above are the true and authentic signatures of the Authorized Treasury Management Signer(s) and that Customer has taken all action required by its organizational documents to appoint the Authorized Treasury Management Signer(s). This Appendix B-1 becomes effective only after U.S. Bank receives and has time to modify its records to reflect the changes noted herein.

Contract Signer Signature:  Print Title: Finance Director
 Print Name: Bryan Kidney Date: 10/17/2016

For Internal Use Only:
 Authorized Signers are related to the Master Services Agreement dated: _____
 Review _____ Validation Method _____ TL Review _____ Imaged _____

To Clem 10/18/16.



Appendix B-1

Change in Authorized Treasury Management Signer(s)

Customer Information

Customer Name: CITY OF LAWRENCE

Tax Identification Number: 48-6033520

Authorized Treasury Management Signers:

Add Authorized Treasury Management Signer(s):

Name	Title	Specimen Signature
THOMAS MARKUS	CITY MANAGER	

Delete Authorized Treasury Management Signer(s) (list name(s) only):

Existing Authorized Treasury Management Signer(s) other than those new Authorized Treasury Management signers listed above (list name(s) only, no specimen signatures are needed)

BRYAN KIDNEY	DIANE STODDARD	CASEY TOOMAY
CINDY NAFF	MARK HEIM	

Updated

The Contract Signer listed below further represents and warrants to the Bank that the signatures listed above are the true and authentic signatures of the Authorized Treasury Management Signer(s) and that Customer has taken all action required by its organizational documents to appoint the Authorized Treasury Management Signer(s). This Appendix B-1 becomes effective only after U.S. Bank receives and has time to modify its records to reflect the changes noted herein.

Contract Signer Signature: Print Title: FINANCE DIRECTOR
 Print Name: Bryan Kidney Date: 6/15/10

For Internal Use Only:
 Authorized Signers are related to the Master Services Agreement dated: _____
 Review _____ Validation Method _____ TL Review _____ Imaged _____



Appendix B-1

Change in Authorized Treasury Management Signer(s)

Customer Information

Customer Name: CITY OF LAWRENCE

Tax Identification Number: 486033520

Authorized Treasury Management Signers:

Add Authorized Treasury Management Signer(s):

Name	Title	Specimen Signature
Diane Stoddard		<i>Diane Stoddard</i>

Delete Authorized Treasury Management Signer(s) (list name(s) only):

David Corliss

Updated

Existing Authorized Treasury Management Signer(s) other than those new Authorized Treasury Management signers listed above (list name(s) only, no specimen signatures are needed)

Bryan Kidney	Cindy Naff	Mark Heim
Casey Toomay		

The Contract Signer listed below further represents and warrants to the Bank that the signatures listed above are the true and authentic signatures of the Authorized Treasury Management Signer(s) and that Customer has taken all action required by its organizational documents to appoint the Authorized Treasury Management Signer(s). This Appendix B-1 becomes effective only after U.S. Bank receives and has time to modify its records to reflect the changes noted herein.

Contract Signer Signature: *Bryan Kidney* Print Title: *FINANCE DIRECTOR*
 Print Name: *Bryan Kidney* Date: *5/21/2015*

For Internal Use Only:
 Authorized Signers are related to the Master Services Agreement dated: _____
 Review _____ Validation Method _____ TL Review _____ Imaged _____



Appendix M Money Center Signers

The Contract Signer listed below further represents and warrants to the Bank that the individuals listed above are authorized to perform Money Center and Safekeeping Services transactions and that Customer has taken all action required by its organizational documents to record this authorization.

Contract Signer Signature: Casey N. Toomay Print Title: Asst. City Manager
Print Name: Casey N Toomay Date: 9/5/18

For Internal Use Only:

Authorized individuals are related to the Master Services Agreement dated: _____

Review _____ Validation Method _____ TL Review _____ Imaged _____



Appendix M Money Center Signers

The following applies to you if you are classified as a municipality or an "obligated person" under the Municipal Advisor Rule.

Municipal Advisor Rule Disclosure

For purposes of Section 15B of the Securities Exchange Act of 1934 (the "Act") (SEC Rule 15Ba1-1 et seq.) (the "Rule"), the Money Center Department within the U.S. Bank Corporate Treasury Division (the "Money Center"): (1) is not recommending and will not recommend an action to you; (2) is not providing and will not provide "advice" to you as defined in the Rule, and any information or communication from the Money Center in respect of your accounts with the Money Center or the Safekeeping Department within the U.S. Bank Corporate Treasury Division (the "Account(s)") or in respect of any securities transaction or potential securities transaction to be executed via the Account(s) is not intended to be and should not be construed as "advice" as defined in the Rule; (3) the Money Center is not acting as an advisor to you and does not owe you any fiduciary duty pursuant to Section 15B of the Act or otherwise with respect to any such Account(s), information, communication, transaction or potential transaction; and (4) subject to FINRA Rules 2111 and 2121, the Money Center is acting for its own interest with respect to the Account(s) and with respect to any securities transactions to be executed via the Account(s).

You should discuss any information or material provided to you by the Money Center in connection with trading, investing or other activity in the Account(s) with any and all of your internal or external advisors and experts that you deem appropriate before acting on any such information or material.

The Contract Signer listed below further represents and warrants to the Bank that the individuals listed above are authorized to perform Money Center and Safekeeping Services transactions and that Customer has taken all action required by its organizational documents to record this authorization.

Contract Signer Signature: *Bryan Kidney*
Print Name: Bryan Kidney

Print Title: Finance Director
Date: 5/21/2015

For Internal Use Only:

Authorized individuals are related to the Master Services Agreement dated: _____

Review _____ Validation Method _____ TL Review _____ Imaged _____