STATE OF ILLINOIS)	
)	SS
COUNTY OF COOK)	

CLERK'S CERTIFICATE

I, Viola Mims, Clerk of the Village of Maywood, in the County of Cook and State of Illinois, do hereby certify that the attached and foregoing is a true and correct copy of that certain Resolution now on file in my Office, entitled:

RESOLUTION NO. R-2016-41

A RESOLUTION DESIGNATING PUBLIC DEPOSITORY AND AUTHORIZING WITHDRAWAL OF MUNICIPAL PUBLIC MONEYS (HINSDALE BANK AND TRUST) (ESCROW ACCOUNT) AND NEW ACCOUNT INFORMATION APPLICATION.

which Resolution was passed by the Board of Trustees of the Village of Maywood at a Regular Village Board Meeting on the 6th day of December, 2016, at which meeting a quorum was present, and approved by the President of the Village of Maywood on the 12th day of December, 2016.

I further certify that the vote on the question of the passage of said Resolution by the Board of Trustees of the Village of Maywood was taken by Ayes and Nays and recorded in the minutes of the Board of Trustees of the Village of Maywood, and that the result of said vote was as follows, to-wit:

AYES: Mayor Edwenna Perkins, Trustee(s) I. Brandon, A. Dorris, M. Rogers and

M. Lightford. NAYS: None

ABSENT: Trustee(s) H. Yarbrough, Sr., and R. Rivers.

I do further certify that the original Resolution, of which the foregoing is a true copy, is entrusted to my care for safekeeping, and that I am the lawful keeper of the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Village of Maywood, this 12thth day of December, 2016.

Village Clerk

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RESOLUTION DESIGNATING PUBLIC DEPOSITORY AND AUTHORIZING WITHDRAWAL OF MUNICIPAL PUBLIC MONEYS

WITHURAW	AL UF MUT	VICIPAL PUBLIC MIDNETS	
TO: (Name/Address of Financial Institution)		FROM: (Name/Address o	if Municipal Entity)
Hinsdale Bank and Trust	1	Village Of Maywood	
First Street Branch	,	Escrow Account	
25 East First Street	-		
Hinsdale, IL 60521 (630) 323-4404	ļ	40 E Madison St	
(030) 323-4404	j	Maywood, IL 60153-2	323
Words or phrases preceded by a see applicable only if Under the Governing Municipality of: Village State of: Illinois	the X is ma e of Maywe	rked. ood	
"IT IS RESOLVED THAT:			100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Hinsdale Bánk and Trust under state law, is hereby designated as a dep be deposited;			
The following described account(s) be opened institution subject to the rules and regulations	l and maint of the Finar	tained in the name of this acial institution from time to	Municipality with the Financia time in effect;
The person(s) and the number thereof design behalf of this Municipality, to sign orders or money from said account(s) and to issue instruction or discount by Financial Institution a instruments or orders for the payment of mone	ated by titt checks in a ructions rec iny and all ry owned or	e designated account(s) is secordance with state law, garding the same and to er checks, drafts, notes, bills, held by said Municipality;	hereby authorized, for and or for payment or withdrawel o idorse for deposit, regoriation certificates of deposit or othe
The endorsement for deposit may be in writing the person so endorsing; and	g, by stamp	, or otherwise, with or with	hout designation of signature o
Any one of the persons holding the offices of or written requests of the Financial Institution this Municipality at the Financial Institution."	this Municle for the tra	ipality designated below is nater of funds or money be	hereby authorized to make ora etween accounts maintained by
THIS RESOLUTION APPLIES TO (Select One): Specific Account Number(s):	X All Acc	counts	
DATE OF RESOLUTION: 12/06/2016		· · · · · · · · · · · · · · · · · · ·	
NAME AND TITLE		SIGNATURE	NO. OF NECESSARY COUNTER SIGNATURES
Stephen J Kuptz			
Treasurer	L		
Edwenna Perkins			
President			
Viola Mims			
Clerk	ł	•	
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Additional comments or instructions:			
r.			
		of the provisions on Page 2.	
This is to Certify, that the foregoing is a tr governing body of Municipality at an open les said resolutions are now in full force and effec	gal meeting	rect copy of resolutions do held on the 6th day of	uly and legally adopted by th of December 2016 an
Signed by			
Viola Mims		Date	
Clerk			
The undersigned member of the governing boils a correct copy of a resolution passed as the	dy not auth rein set fort	orized to sign orders or che h.	ecks certifies that the foregoing
		Date	
Title:		Date	
© Complance Systems, Inc. 1987 - 2013 ITEM 583BALT [11/2013] Page 1 of 2			Author Countypoces Ligans co.

"IT IS FURTHER RESOLVED, that the Financial Institution be and is hereby authorized and directed to honor, certify, pay and charge to any of the accounts of this Municipality, all orders or checks for the payment, withdrawal or transfer of funds or money deposited in these accounts or to the credit of this Municipality or whatever purpose or to whomever payable, including requests for conversion of such instruments into cash as negotiated by or for the credit of any persons signing such instrument or payable to or tor the credit of any persons signing such instrument or payable to or tor the credit of any other officer, agent or employee of this Municipality, when signed, accepted, endorsed or approved as evidenced by original or facsimile signature by the person(s), and the number thereof, designated by title for the accounts described in the foregoing resolution, and to honor any request(s) made in accordance with the foregoing resolution, whether written or oral, and including but not limited to, request(s) made by telephone of other rinancial institution, and the financial Institution shall not be required or under any dury to inquire as to the circumstances of the issuance or use of any such instrument of request or the application or use of proceeds thereof.

FURTHER RESOLVED, that the Financial Institution be and is hereby authorized to comply with any process summons, order, injunction, execution, distraint, levy, lien, or notice of any kind (hereafter called "Process") received by or served upon the Financial Institution, by which, in the Financial Institution's opinion, another person or entity claims an interest in any of these accounts and Financial Institution may, at its option and without liability, thereupon refuse to honor orders to pay or withdraw sums from these accounts and may hold the balance therein until Process is disposed of the Financial Institution's satisfaction.

FURTHER RESOLVED, that any one of the persons holding the offices of this Municipality designated above is hereby authorized (1) to receive for and on behalf of this Municipality, accurates, currency or any other property of whatever nature held by, sent to, consigned to or delivered to the Financial Institution for the account of or for delivery to this Municipality, and to give receipt therefor, and the Financial Institution is hereby authorized to make delivery of such property in accordance herewith, (2) to sell, transfer, endorse for sale or otherwise authorize the sale or transfer of securities or any other property of whatever nature held by, sent to, consigned to or delivered to the Financial Institution for the account of or for delivery to this Municipality, and to receive and/or apply the proceeds of any such sale to the credit of this Municipality in any such manner as he/she/they deem(s) proper, and the Financial Institution is hereby authorized to make a sale or transfer of any of the aforementioned property in accordance herewith, and (3) in accordance with state law, to accept such security, it applicable, and to execute such documents as said officer deems proper and necessary to secure the funds of this Municipality and to issue instructions regarding the same.

FURTHER RESOLVED, that this Municipality assumes full responsibility for any and all payments made or any other actions taken by the Financial Institution in reliance upon the signatures, including feesimiles thereof, of any person or persons holding the offices of this Municipality designated above regardless of whether or not, the use of a lacelimite signature was unlawful or unauthorized and regardless of by whom or by what means the purported signature or feesimile signatures are here allowed to any instrument if such signatures resemble the specimen or feesimile signatures provided to the Financial Institution, for regularly to honor any signatures not provided to the Financial Institution, for honoring any requests for the transfer of funds or money between accounts of the instructions from the persons designated in the foregoing resolutions regarding security for the accounts notwithstanding any inconsistent requirements of this Municipality agrees to indemnify and hold harmless the Financial institution against any and all claims, demands, losses, costs, damages or expenses suffered or incurred by the Financial institution resulting from or arising out of any such payment or other action.

Select if applicable:

Further Resolved, the Financial Institution is authorized to honor facsimile and other non-manual signatures and may honor and charge the Municipality for all negotiable instruments, checks, drafts, and other orders for payment of money drawn in the name of the Municipality, on its regular accounts, including an order for electronic debit, whether by electronic tape or otherwise, regardless of by whom or by what means the lacsimile signature or other non-manual signature may have been affixed, or electronically communicated, if such in a signature resembles the specimen attached to this Resolution or filed with the Financial Institution, regardless of whether misuse of a specimen or non-manual signature is with or without the negligence of the Municipality. The Specimen Facsimile Signature Exhibit, if attached, is incorporated into and is an integral part of this Resolution. The Municipality indemnifies the Financial Institution for all claims, expenses, and losses resulting from the honoring of any signature certified or reliasing to honor any signature not so certified.

FURTHER RESOLVED, that the Secretary or Clerk of this Municipality be and hereby is authorized and directed to certify to the Financial institution the foregoing resolutions, that the provisions thereof are in conformity with law, the names, incumbencies and specimen or facsimile signature(s) on this resolution and, if applicable, on signature cards of the officer or officers hamed therein, and that the foregoing resolutions and signature cards, if any, and the authority thereby conferred shall remain in full force and effect until this Municipality notifies the Financial Institution to the contrary in writing; and the Financial Institution may conclusively presume that such resolutions and signature cards are in effect and that the persons identified therein from time to time as officers of the Municipality have been duly elected or appointed to and continue to hold such offices.

FURTHER RESOLVED, that this resolution authorizes the Financial Institution to honor all orders or checks when bearing, or purporting to bear, the lecsimile signature(s) provided below, if any, by any of the named officers, or in an attached Exhibit when indicated."

Facsimile Signature	Facsimile Signature
The Specimen Facsimile Signature Exhibit attached Resolution.	is incorporated into and is an integral part of this
By initialing, Lacknowledge this is page 2 of 2 of the flesolution Designal Public Depository and Authorizing Withdrawal of Municipal Public Money	-

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NEW ACCOUNT INFORMATION Financial Institution Name and Address Revised 11/30/2016 Hinsdale Bank and Trust First Street Branch 25 East Pirst Street DATE 10/26/2016 Hinsdale, IL 60521 Check if applicable: TEMPORARY REPLACEMENT (630) 323-4404 ACCOUNT INFORMATION AMOUNT OF DEPOSIT \$ 499,954.38 ACCOUNT NUMBER 00230180140 TITLE OF ACCOUNT Village Of Maywood ACCOUNT T.I.N. 36-6005990 Escrow Account 40 E Madison St Maywood IL 60153-2323 OWNERSHIP TYPE Public Depository Worlds, numbers on phrases preceded by a ____ are applicable only when marked, i.e., [X]. Opened By Brandon Garrett BUSINESS ENTITY INFORMATION RESOLUTION DATE 12/06/2016 **BUSINESS NAME AND ADDRESS** E-MAIL ADDRESS Village Of Maywood 40 E Madison St Maywood, IL 60153-2323 ASSUMED NAME IF DIBIA CONTACT NAME CONTACT TITLE CONTACT PHONE OTHER SIGNER #1 INFORMATION TAX ID NUMBER NAME AND ADDRESS 000-00-0000 DATE OF BIRTH Stephen J Kuptz ID TYPE Drivers License 40 E Madison St ID NUMBER ID ISSUED BY Maywood, IL 60153-2323 SECRETARY OF STATE ID ISSUING LOCATION IL TITLE /CAPACITY Treasurer ID ISSUE DATE PRIMARY PHONE 09/19/2016 708-473-0931 ID EXPIRATION SECONDARY PHONE 09/19/2020 E-MAIL ADDRESS Skuptz@maywood-il.org SIGNER #2 INFORMATION TAX ID NUMBER NAME AND ADDRESS 000-00-0000 DATE OF BIRTH Edwenna Perkins ID TYPE Drivers License ID NUMBER 40 E Madison St SECRETARY OF STATE ID ISSUED BY Maywood, IL 60153-2323 ID ISSUING LOCATION IL TITLE /CAPACITY President ID ISSUE DATE 08/06/2013 PRIMARY PHONE 708-724-1942 **ID EXPIRATION** 08/06/2017 SECONDARY PHONE E-MAIL ADDRESS SIGNER #3 INFORMATION TAX ID NUMBER NAME AND ADDRESS 000-00-0000 DATE OF BIRTH Viola Mims ID TYPE Drivers License ID NUMBER 40 E Madison St Maywood, IL 60153-2323 ID ISSUED BY SECRETARY OF STATE ID ISSUING LOCATION IL TITLE /CAPACITY Clerk 07/17/2014 ID ISSUE DATE PRIMARY PHONE 708-450-6363 ID EXPIRATION SECONDARY PHONE 10/04/2017 E-MAIL ADDRESS SIGNER #4 INFORMATION TAX ID NUMBER NAME AND ADDRESS DATE OF BIRTH ID TYPE ID NUMBER ID ISSUED BY ID ISSUING LOCATION TITLE /CAPACITY ID ISSUE DATE PRIMARY PHONE ID EXPIRATION SECONDARY PHONE E-MAIL ADDRESS @Compliance Systems, Inc. 2015 11Est 4520814 (05/2015) Page 1 of 2

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	ACCOUNT NUMBER 00230180140				
VERIFICATION / FOLLOW-UP					
ADDITIONAL INSTRUCTIONS OR COMMENTS					
TAXPAYER IDENTIFICATION NUMBER CERTIFICATION	Europe and Namu				
Under penalties of perjury, I certify that:	Exempt payee code, if any: Exemption from FATCA reporting code, if any:				
1. The number shown on this form is my correct texpayer 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 (Notice; If you are subject to backup withholding, cross out this fine), and 3. I am a U.S. citizen or other U.S. person (defined in the W-9 Instructions), and 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.					
SIGNATURE Village Of Maywood D	Taxpayer Identification Number: 36 - 6005990 ATE				
ADDITIONAL TERMS					
Prohibition Against Unlawful Internet Gambling: The bank is required to enforce a prohibition in a federal law known as the Unlawful Internet Gambling Enforcement Act of 2006 (UIGEA), which prohibits commercial customers from receiving deposits or any credits into their accounts that are derived from illegal Internet gambling. By continuing to maintain an account with the bank, you agree not to engage in illegal Internet gambling, and to tell us if your account is ever used in connection with any form of Internet gambling, even if you believe that it is legal. If you don't notify us, we may deny further access to various payment methods, close your account or take other action which we believe to be necessary to comply with UIGEA.					
As an officer or owner of the above named organization, (have been notified that the Bank is required by regulations implementing the Unlawful Internet Gambling Act of 2006 to ensure that its commercial customers' accounts do not receive deposits or other credits derived from Illegal Internet gambling. By signing below, I hereby certify that the above-named organization does not engage in an internet gambling business of any kind, either legal or, Illegal, and that I or a representative of the organization will notify the bank immediately if the organization engages in an Internet gambling business at any future time.					
IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NET	W ACCOUNT				
To help the government fight the funding of terrorism and money laundering activities. Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.					
What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.					
ACKNOWLEDGMENT By signing this document, the undersigned acknowledge that they have opened the account number listed above, and have received, understand and agree to be bound by the terms of the Account Agreement for that account. The undersigned certify that all information provided to the institution is true and accurate. The undersigned acknowledge receipt of a copy of this institution's Privacy Policy, and where applicable, the Funds Availability Policy. All signers are acting on behalf of the business entity. All signers authorize this institution to make inquiries from any consumer reporting agency, including a check protection service, in connection with this account.					
Authorized Signer only. Title: Treasurer	Authorized Signer only. Title: President				
X Day	x Edwenna Perkins Date				
Stephen J Kuptz Date	Edwenna Perkins Date				
Authorized Signer only. Title: Clerk	Authorized Signer only, Title:				
X Viola Mims Date	NDate				
FOR INSTITUTION USE					

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