SCHOOL DISTRICT DEPOSITORIES PROPOSAL FORM

TO SCHOOL BOARD OF THE GULFPORT SCHOOL DISTRICT

We submit the following bid proposal for serving as the deposit for Gulfport School District for the period beginning July 1, 2023 and ending June 30, 2026 and thereafter until new arrangements shall be made according to law:

| 1. | is insured by the Federal Deposit Insurance Corporation or |
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| | any successors to such insurance corporation. |
| 2. | has met the primary capital to assets ratio of five and one- |
| | half percent (5 1/2%) or more as of June 30,, and has received certification of such from the State |
| | Treasurer. Please attach commission in response. |
| 3. | has offices located in |
| | , Mississippi. Please attach in response a list of all branches located in the county the |
| | school district is located. Include address of each branch. |
| 4. | has employees located in |
| | , Mississippi. |
| 5 | agrees to place on deposit for the |
| | Gulfport School District as security with the State Treasurer any of the securities eligible for securing of state funds |
| | as provided in Section 27-105-5, Mississippi Code Ann. (1972) in an amount at least equal to one hundred five percent |
| | (105%) of the maximum sum to be placed on deposit in such financial institution at any one time exclusive of that |
| | portion of accounts insured by the Federal Deposit Insurance Corporation or any successors to such insurance |
| | corporation. |
| | Or, is a public funds guaranty pool member under sections 27-105-5 and 27-105- |
| | 6, Mississippi Code Ann. (1972). The qualified financial institution shall secure those deposits by placing qualified |
| | securities on deposit with the State Treasurer as provided in section 27-105-5. |
| | agrees to execute a Collateral Security Agreement with the |
| | District in the form recommended by the State Treasurer of the State of Mississippi for the purpose of complying |
| | with Section 1823(e) of FIRREA as necessary to ensure that the District will possess a preferred claim to pledged |
| | securities in the event of default by the depository bank. All Collateral Security Agreements will be executed prior |
| | to July 1, |
| 7. | agrees to monitor monthly deposits of the district in order to ensure adequate securities |
| | are pledged and to provide the district with an annual report listing accounts reported to the State Treasurer. |
| Q | agrees to prepare monthly statements beginning with the first |
| ٠. | day of the month and ending with the last day of the month, showing debits, credits, balances, and sequential listing |
| | of cashed checks within five (5) business days of the statement closing date. |
| | of cashed checks within five (3) dusiness days of the statement closing date. |

| 9. | agrees to pay | interest on the District's a | ccounts based on a | fixed rate or variable | | |
|-----------|---|------------------------------|---------------------|------------------------|--|--|
| | rate. Variable rates shall be equal to the prior mor | nth-end U.S. Federal Fund | s Rate plus or minu | s | | |
| | basis points. Current U.S. Target Federa | l Funds Rate is | | | | |
| <u>CU</u> | IRRENT RATES BASED ON ABOVE CALCUL. | <u>ATIONS</u> | | | | |
| | | Variable | Fixed | | | |
| I | DDA Checking Accounts | % | | % | | |
| Λ | Money Market/Savings Accounts | % | | % | | |
| S | Service Fees | Monthly | Monthly | | | |
| Ι | <i>Note:</i> Interest shall be earned on the average dai | · | monning | | | |
| |) | | earnings allowance | e on daily District | | |
| | account balances that offset bank service charges | | | | | |
| 11 | l, | agrees to, if requeste | d, offer advice on | cash management | | |
| | and investment strategies necessary to properly u | tilize the School District's | assets. | | | |
| 12 | 2. | agrees to provide | the requested | information | | |
| | necessary for the completion of the annual audit a | at no charge to the district | or its auditors. | | | |
| 13 | 3 | | | | | |
| | checking or savings accounts for no charge or min | | - | - | | |
| | wire transfers, or returned deposit items. In addit | | | | | |
| | listed on the following page at no charge or minimum charge to the district based on account data provided by the | | | | | |
| | school district and data listed below: | | | | | |
| | | | | | | |

| Account Data | | | |
|------------------------------------|------------|--|--|
| Average Monthly Ledger Balance | 32,000,000 | | |
| Number of DDA Checking Accounts | 10 | | |
| Number of Savings Accounts | 0 | | |

| Co | Completed By School District | | | Financial Institution's Response | |
|--|---|--------------------------------------|---|--|--|
| Account Services | Services Utilized? (Yes/No/Interested) | Monthly Average Volume | Provided at No Charge (Yes or No) | Direct Fee or Service Charge (Indicate Fee or Charge) | |
| Stop Payments | Yes | 0 | Choose an item. | | |
| Outgoing Wire Transfers | no | 0 | Choose an item. | | |
| Incoming Wire Transfers | no | 0 | Choose an item. | | |
| Night Depository Services | Yes | 1 | Choose an item. | | |
| Locking Bank Bags | Yes | 70 | Choose an item. | | |
| Keys for bank night drop | Yes | 3 SETS | Choose an item. | | |
| Deposit Slips | Yes | 385 | Choose an item. | | |
| Checks | Yes | 400* | Choose an item. | | |
| Re-deposit of returned deposit items at least once | No | 0 | Choose an item. | | |
| Research/Statement Reproduction | Yes | 0 | Choose an item. | | |
| Payroll Direct Deposit Services | Yes | One monthly 850 employees | Choose an item. | | |
| Transactions handled via phone | No | 0 | Choose an item. | | |
| Cash in to be counted by teller at time of deposit | Yes | 125,000 month | Choose an item. | | |
| Internet Banking Access | Yes | YES | Choose an item. | | |
| Overdraft Fees and Penalties | No | 0 | Choose an item. | | |
| Positive Pay | Yes | 7 batches per month | Choose an item. | | |
| Reconciliation | No | n/a | Choose an item | | |
| Controlled Disbursements | No | n/a | Choose an item. | | |
| Stored Value (Payroll) Cards | No | n/a | Choose an item. | | |
| Lockbox Services | No | n/a | Choose an item. | | |
| Check to ACH Conversion | No | n/a | Choose an item. | | |
| Balance and Transaction Services | Yes | Use internet banking | Choose an item. | | |
| <i>Note:</i> Please add ar | ny additional services you o | leem necessary or have interest in t | ınder "Service" colu | mn | |
| Serialized Deposit Forms | Yes | | Choose an item. | | |
| Tokens to access On-line Banking | Yes | | Choose an item. | | |
| Book Transfers | Yes | | Choose an item. | | |
| | Choose a response. | | Choose an item. | | |
| | Choose a response. | | Choose an item. | | |
| *checks provided by GSD | Choose a response. | | Choose an item. | | |
| | Choose a response. | | Choose an item. | | |
| | Choose a response. | | Choose an item. | | |

agrees to provide ledger credit on the same day as deposits occur (holidays and weekends excluded). This includes same day credit on wire transfer of funds from the federal and state government, and same day credit on deposits made by the District prior to 2:00 P.M. CST.

| Financial Institution Name: | |
|-----------------------------|--|
| Primary Contact Name: | |
| Telephone Number: | |
| Street Address: | |
| City, State, Zip Code: | |
| Email Address: | |
| | |
| Type or Print Name: | |
| Authorized Signature: | |
| Title: | |
| Date: | |