

RESOLUTION

Advisory Neighborhood Commission 30

Resolved that this Commission approves the ANC's participation in the Advisory Neighborhood Commission Security Fund and authorizes the Treasurer to pay the \$25 fee for the period January 1, 2016 through December 31, 2016. The Chairperson and Secretary are authorized to execute the attached agreement.

It is understood that: (1) the check for participation in the ANC Security Fund should be made payable to "ANC Security Fund," (2) the ANC is not considered a participant in the Fund until the ANC has received the acceptance section of the agreement which has been signed by the District of Columbia Auditor, and (3) the agreement will not be accepted by the Auditor until all required documents have been received by the Office of the Auditor. The required documents are:

- Resolution
- Agreement
- ANC Check
- Statement of Information - Chairperson
- Statement of Information - Treasurer
- Bank Survey
- Copy of Current Bank Signature Card

Resolution approved at public meeting held on: 1/19/16

Margaret S. Siegel
Signature of Treasurer

[Signature]
Signature of Chairperson

[Signature]
Signature of Secretary

**Advisory Neighborhood Commission Security Fund
AGREEMENT FOR CALENDAR YEAR 2016**

In order to comply with the requirements of the D.C. Code, Section 1-309.13 of the Advisory Neighborhood Commissions Act of 1975, as amended, the undersigned Advisory Neighborhood Commission agrees to participate in the Advisory Neighborhood Commission Security Fund.

Advisory Neighborhood Commission (ANC) 3C agrees to contribute the sum of twenty five dollars (\$25), to participate in the Fund for the period January 1, 2016 to December 31, 2016. **Please make checks payable to "The ANC Security Fund."**

The Fund shall secure the ANC against misappropriation and negligent losses of funds by the Chairperson and Treasurer of the ANC for unpaid operating expenses that do not exceed the amount of the loss or do not exceed 50 percent of the ANC's Fiscal Year 2015 annual allocation, whichever is less. The Fund, however, shall not be liable for any loss resulting from an expenditure, whether or not legal, that was authorized by vote of the ANC.

Monies from the Fund shall be payable to the ANC only upon written application to the Fund signed by a majority of the members of the ANC and approved by the ANC Security Fund Board of Trustees.

This agreement shall be subject to the guidelines established by the Fund's Board of Trustees.

ADVISORY NEIGHBORHOOD COMMISSION 3C

By [Signature] _____ Date 1-19-16

[Signature] Secretary Date 1/19/16

Carl Rolles, Chairperson and Margaret Siegel, Treasurer, of the above ANC consent to participation in the Advisory Neighborhood Commission Security Fund and agree to be personally liable to the Fund for any sums paid out by the Fund as a result of my wrongful misappropriation or negligent loss of ANC monies.

[Signature] _____ Date 1-19-16
Signature of Chairperson
[Signature] _____ Date 1/18/16
Signature of Treasurer

ACCEPTED:
_____, 2016

ADVISORY NEIGHBORHOOD COMMISSION SECURITY FUND
By _____
Kathy Patterson
District of Columbia Auditor

MEMORANDUM
Statement of Information - Chairperson
Calendar Year 2016

TO: Kathy Patterson
District of Columbia Auditor

FROM: Advisory Neighborhood Commission 3C

ANC address: Pa Bon
Washington, DC 20008

ANC telephone number: _____

The following information is submitted as of 1/19/16

NAME OF CHAIRPERSON Carl Roller

HOME ADDRESS 3530 39th St NW
A649, WDC 20016

BUSINESS ADDRESS (if any) _____

HOME TELEPHONE NUMBER 202 531 2777

BUSINESS TELEPHONE NUMBER (if any) _____

E:MAIL ADDRESS (if any) rolleranc@gmail.com

1-19-16
Date

[Signature]
Signature of Chairperson

Mail to: Kathy Patterson
District of Columbia Auditor
Office of the District of Columbia Auditor
717 14th Street, N.W., Suite 900
Washington, D.C. 20005

Office of the District of Columbia Auditor
 Advisory Neighborhood Commission
 Bank Survey

ANC 3C

Calendar Year 2016

ANC's Bank Name:

Bank of America

ANC's Bank Contact Person:

Monika Bolla

ANC's Bank Contact Person's Phone #:

202/674-4350

ANC's Bank Mailing Address:

3401 Connecticut Ave NW

City/State/Zip Code: _

WDC 20008

ANC's Bank Routing Number

05401204

ANC Bank Account Name:

DC Government ANC 3C

A. Checking Account Name

" "

B. Savings Account Name

" "

ANC's Bank Account Number:

A. Checking Account Number:

001914198133

B. Savings Account Number:

0019 2020 3053

ANC's D.C. Tax I.D. # (should be DC TIN):

068 08A

ANC's Mailing Address:

PO Box

City/State/Zip Code

WDC 20008

ANC's Office Phone #:

ANC's E:mail address:

ANC3C-office@gmail.com

ANC Chairperson:

Carl Roller

ANC Vice-Chairperson:

Catherine May

ANC Treasurer:

Margaret Siegel

ANC Secretary:

Gwendolyn Bole

Please list all officers who are signatories on the ANC's bank signature card for calendar year 2016 and attach a copy of the bank signature card and completed verification below.

Calendar Year 2016 Bank Signatories

- Carl Roller
- Catherine May
- Gwendolyn Bole
- Margaret Siegel

BANK VERIFICATION	
Bank Official Signature	<u>[Signature]</u>
Date	<u>1/17/16</u>

MEMORANDUM
Statement of Information - Treasurer
Calendar Year 2016

TO: Kathy Patterson
District of Columbia Auditor

FROM: Advisory Neighborhood Commission 3C

ANC address: PO Box 4966
Washington, DC 20008

ANC telephone number: _____

The following information is submitted as of 1/19/16

NAME OF TREASURER

Margaret Siegel

HOME ADDRESS

3019 Ordway St NW
WDC 20008

BUSINESS ADDRESS (if any)

HOME TELEPHONE NUMBER

202/244-1729

BUSINESS TELEPHONE NUMBER (if any)

202/246-3019

E:MAIL ADDRESS (if any)

margaret.siegel@verizon.net

1/19/16

Date

Margaret A. Siegel

Signature of Treasurer

Mail to: Kathy Patterson
District of Columbia Auditor
Office of the District of Columbia Auditor
717 14th Street, N.W., Suite 900
Washington, D.C. 20005

Certified Copy of Corporate Resolutions - Opening and Maintaining Deposit Accounts and Services

BANK OF AMERICA, N.A. (THE "BANK")

Account Number: 001914198133

Name of Corporation DISTRICT OF COLUMBIA GOVERNMENT

I, the undersigned, hereby certify to BANK OF AMERICA, N.A.

that I am the Secretary/Assistant Secretary and the designated keeper of the records and minutes of

DISTRICT OF COLUMBIA GOVERNMENT

State of District of Columbia (the "Corporation"); that the following is a true copy of resolutions duly adopted by the Board of

Directors of said Corporation at a meeting duly held on the 24th day of January 2015, at which a quorum was present and acted

throughout or adopted by the unanimous written consent of the Board of Directors; and that such resolutions are in full force and effect and have not been amended or rescinded.

1. Resolved, that BANK OF AMERICA, N.A. (the "Bank") is hereby designated as a depository of the Corporation and that deposit accounts and/or time deposits (CDs) be opened and maintained in the name of this Corporation with Bank in accordance with the terms of the Bank's Deposit Agreement and Disclosures and the applicable rules and regulations for such accounts; that any one of the following officers or employees of the Corporation:

CARL ROLLER
Name
Catherine Macey
Name
Awendolyn F. Boyle
Name
Margaret H. Siegel
Name

Chairman
Title
Vice Chairman
Title
Secretary
Title
Treasurer
Title

is hereby authorized, on behalf of this Corporation and in its name, to execute and to sign any application, deposit agreement, signature card and any other documentation required by Bank to open said accounts; to sign checks, drafts, notes, bills of exchange, acceptances, time deposits (CDs) or other orders for payment of money; to endorse checks, drafts, notes, bills, time deposits (CDs) or other instruments owned or held by this Corporation for deposit with Bank or for collection or discount by Bank; to accept drafts, acceptances, and other instruments payable at Bank; to place orders with Bank for the purchase and sale of foreign currencies on behalf of this Corporation; to execute and deliver an electronic fund transfers agreement and to make transfers or withdrawals by electronic transfer on behalf of the Corporation; to obtain an access device (including but not limited to a card, code, or other means of access to the Corporation's accounts) that may be used for the purpose of initiating electronic fund transfers [Corporation agrees and acknowledges that neither the Electronic Funds Transfer Act (15 U.S.C. 1693 et seq.) nor Regulation E (12 C.F.R. Part 205) are applicable to any such access device]; to establish and maintain a night deposit relationship; to execute and deliver a wire transfer agreement and to request, or to appoint or delegate from time to time such persons who may request, wires of funds; to enter into any agreements with the Bank for the provision by Bank of various Treasury Management services to this Corporation as such officer or employee may determine, in his or her sole discretion, and to sign any and all documents and take all actions required by Bank relative to such Treasury Management services or the performance of the Corporation's obligations thereunder, and that any such Treasury Management agreement(s) shall remain in full force and effect until written notice to terminate given in accordance with the terms of any such agreement shall have been received by Bank and that such termination shall not affect any action taken by the Bank prior to such termination; to rent or lease a safe deposit box from Bank, to execute the rental agreement or lease, to enter the safe deposit box and to terminate the rental agreement or lease; to take whatever other actions or enter in to whatever other agreements relating to the accounts or investment of funds in such accounts with Bank and to execute, amend, supplement and deliver to Bank such agreements on behalf of the Corporation upon such terms and conditions as such officer or employee may deem appropriate and to appoint and delegate, from time to time, such person(s) who may be authorized to enter into such agreements and take any other actions pursuant to such agreements in connection with said accounts that the officer or employee deems necessary; and to waive presentment, demand, protest, and notice of protest or dishonor of any check, note, bill, draft, or other instrument made, drawn or endorsed by this Corporation; and

2. Further Resolved, that the Bank be and is hereby authorized to honor, receive, certify, pay or exchange for money orders or other instruments all instruments signed in accordance with the foregoing resolutions even though such payment may create an overdraft or even though such instruments may be drawn or endorsed to the order of any officer or employee signing the same or tendered by such officer or employee or a third party for exchange or cashing, or in payment of the individual obligation of such officer or employee, or for deposit to such officer's or employee's personal account and Bank shall not be required or be under any obligation to inquire as to the circumstances of the issuance or use of any instrument signed in accordance with the foregoing resolutions or the application or disposition of such instrument or the proceeds thereof; and, further, that the Bank is authorized to honor any instructions regarding withdrawals, orders for payment or transfer of funds whether oral, by telephone or electronic means if such withdrawal, orders or transfer are initiated by an above authorized officer or employee; and

3. Further Resolved, that the Bank be and is hereby requested, authorized and directed to honor and to treat as authorized, checks, drafts or other orders for the payment of money drawn or purportedly drawn in this Corporation's name, including those payable to the individual order of any person whose name appears thereon as signer thereof, when bearing or purporting to bear the facsimile signature of an officer or employee authorized in the foregoing resolutions and Bank shall be entitled to honor, to treat as authorized, and to charge this Corporation for such checks, drafts, or other orders regardless of by whom or by what means the actual or purported facsimile signature thereon may have been affixed thereto, if such signature resembles the facsimile specimen duly certified to or filed with the Bank by the Secretary or Assistant Secretary or other officer of this Corporation or if such facsimile signature resembles any facsimile signature previously affixed to any check, draft, or other order drawn in the Corporation's name, which check, draft, or other order was accepted and paid without timely objection by the Corporation, thereby ratifying the use of such facsimile signature; and the Corporation hereby indemnifies and holds the Bank harmless against any and all loss, cost, damage or expense suffered or incurred by the Bank arising out of or in any way related to the misuse or unlawful or unauthorized use by a person of such facsimile signature; and



Account Number: 0019 1419 8133

Signature Card Addendum on File

ATM/Deposit/Debit Card Request

Provided that the account referenced above is eligible to receive automated teller machine cards and/or Debit Cards, I (as authorized by the resolutions and/or court documents and/or other agreements which authorize this account) hereby request the issuance of such cards to any of the authorized signers on this account.

Authorized Signer	Title
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Review Information

Customer 1:

Name	MARGARET A SIEGEL								
ID Type:	US Driver License W/Photo	ID#:	1469154	ID Issuer:	DCDL	Iss. Date:	05/2009	Exp. Date:	05/2017
ID Type:	Major Fin'l Credit Cd	ID#:	4000	ID Issuer:	AMEX	Iss. Date:	N/A	Exp. Date:	12/2017

Customer 2:

Name	CARL A ROLLER								
ID Type:	US Driver License W/Photo	ID#:	9545172	ID Issuer:	Dist of Columbia	Iss. Date:	08/2012	Exp. Date:	08/2020
ID Type:	BOA ATM/Ckcd No Photo	ID#:	1432	ID Issuer:	1432	Iss. Date:	N/A	Exp. Date:	08/2016

Customer 3:

Name	GWENDOLYN BOLE								
ID Type:	US Driver License W/Photo	ID#:	9580508	ID Issuer:	DCDL	Iss. Date:	05/2011	Exp. Date:	06/2019
ID Type:	US Local Govt ID W/Photo	ID#:	08261	ID Issuer:	DC GOVT ID	Iss. Date:	12/2014	Exp. Date:	01/2017

Customer 4:

Name	CATHERINE S MAY MD								
ID Type:	US Driver License W/Photo	ID#:	9598671	ID Issuer:	DCDL	Iss. Date:	02/2009	Exp. Date:	04/2017
ID Type:	Major Fin'l Credit Cd	ID#:	9172	ID Issuer:	CHASE CC	Iss. Date:	N/A	Exp. Date:	03/2016

Customer 5:

Name									
ID Type:		ID#:		ID Issuer:		Iss. Date:		Exp. Date:	
ID Type:		ID#:		ID Issuer:		Iss. Date:		Exp. Date:	

Bank Information

Date	01/24/2015
Banking Center Name	CLEVELAND PARK
Associate's Name	Jose Rufino
Associate's Phone Number	202-624-4350



Bank Number: 357

Account Number: 0019 1419 8133

Account Type: DDA SAV CD

Account Title:

DISTRICT OF COLUMBIA GOVERNMENT

ADVISORY NEIGHBORHOOD COMMISSION 3C

Legal Designation:

- Individual/Sole Proprietor Trust/Estate Unincorporated Association C Corporation S Corporation
- Partnership (Enter the type of partnership: General, LP, LLP or LLLP) _____
- Limited Liability Company (Enter tax classification: C=C Corporation, S=S Corporation, P=Partnership or M=Single Member Sole Proprietor) _____
- Other (Defined in W-9 instructions) _____

Social Security Number 536-00-1131 (or) Employer Identification Number _____

By signing below, I/we acknowledge and agree that this account is and will be governed by the terms and conditions set forth in the account opening documents for my/our account, as they are amended from time to time. The account opening documents include the Deposit Agreement and Disclosures and the Business Schedule of Fees. Furthermore, I/we acknowledge the receipt of these documents. By signing below, I/we acknowledge and agree that the signature(s) will serve as verification for any transactions in connection with this account, and as the certification (set forth below) of the taxpayer identification number (TIN) to which I/we want interest reported. The Deposit Agreement includes a provision for alternative dispute resolution.

Substitute Form W-9, Certification - Under penalties of perjury, I certify that: (1) The number shown on this form is the correct taxpayer 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, and (3) I am a US citizen or other US 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.

Certification Instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. (Please refer to the IRS instructions for Form W-9).

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

Nonresident Alien Status (if applicable) If the beneficial owner of this account is a foreign person, check here, and complete and sign the applicable Form(s) W-8.

Name (typed or printed)	Title (if applicable)	Signature	Date
1 MARGARET A SIEGEL	Treasurer	<i>Margaret A Siegel</i>	1/24/15
2 CARL A ROLLER	Chairman	<i>Carl A Roller</i>	1/24/15
3 GWENDOLYN BOLE	Secretary	<i>Gwendolyn Bole</i>	1/24/15
4 CATHERINE S MAY MD	Vice Chairman	<i>Catherine S May MD</i>	1/24/15
5 _____	_____	_____	_____



Account Number: 001914198133

4. **Further Resolved**, that endorsements for deposit may be evidenced by the name of the Corporation being written or stamped on the check or other instrument deposited, without designation of the party making the endorsement, and Bank is authorized to supply any endorsement on any instrument tendered for deposit or collection; and

5. **Further Resolved**, that the Secretary or Assistant Secretary of this Corporation shall certify to Bank names and signatures of persons authorized to act on behalf of this Corporation under the foregoing resolutions and shall from time to time hereafter, as changes in the identity of said officers and employees are made, immediately report, furnish and certify such changes to Bank and shall submit to Bank a new account signature card reflecting such change(s) in order to make such changes effective and Bank shall be fully protected in relying on such certifications and shall be indemnified and saved harmless from any claims, demands, expenses, losses, or damages resulting from, or growing out of, honoring the signature of any officer or employee so certified, or refusing to honor any signature not so certified; and

6. **Further Resolved**, the foregoing resolutions shall remain in full force and effect and the authority herein given to all of said persons shall remain irrevocable as far as Bank is concerned until three (3) business days after Bank is notified in writing of the revocation of such authority and that receipt of such notice shall not affect any action taken by said Bank prior thereto; and

7. **Further Resolved**, that all transactions by any officer or employee of this Corporation on its behalf and in its name with Bank prior to the delivery to Bank of a certified copy of the foregoing resolutions are, in all respects, hereby ratified, confirmed, approved and adopted; and

8. **Further Resolved**, that the Secretary or Assistant Secretary be and hereby is, authorized and directed to certify these resolutions to said Bank and that the provisions hereof are in conformity with the Charter or Articles of Incorporation and Bylaws of this Corporation and that the Secretary or Assistant Secretary be, and hereby is, authorized and directed to certify, from time to time hereafter, the names of the holders of the above authorized titles and their signatures on any signature card or other documentation required by said Bank.

In Witness Whereof, I have hereunto subscribed my name and affixed the seal of this Corporation, this _____ day of _____

Secretary/Assistant Secretary

(Corporate Seal)



Bank Information

Date	01/24/2015
Banking Center Name	CLEVELAND PARK
Associate's Name	Jose Rufino
Associate's Phone Number	202-624-4350