# PENINSULA AIRPORT COMMISSION

# **MINUTES**

June 12, 2017

PRESIDED: George Wallace

The special meeting of the Peninsula Airport Commission was held on Monday, June 12, 2017 at 8:00 a.m. in the Airport Banquet Room at the Newport News/Williamsburg International Airport.

# Commissioners present were:

Rob Coleman, Walter Jubien, Jr., Sharon Scott and George Wallace.

(Commissioner Steve Mallon was not in attendance)

# **Interim Executive Director**

Mr. Sanford B. Wanner

### Director, Finance and Administration

Ms. Renee Ford

# **Executive Assistant**

Ms. Rhonda Wissinger

### **Legal Counsel**

James S. McNider, III

#### **Public in Attendance**

Dave Ress-The Daily Press Joe Fudge-The Daily Press Kim Pierceall-The Virginian Pilot

# Bank Resolution(s)

Mr. Sanford B. Wanner, Interim Executive Director, presented a copy to each Commissioner of the proposed bank resolutions for the Commission to expand its banking options. The three banks that we are proposing are:

Eastern Virginia Bank Suntrust BB&T

Mr. Wanner recommends that the Commission adopt the proposed banking resolutions and associated banking documents to expand the Commission's options.

Should a new banking relationship occur, fees will be reviewed appropriately.

Mr. Wanner also wanted to note that TowneBank will remain our primary bank.

Commissioner Rob Coleman made the below motion, after noting that in front of each Commissioner were three sets of banking resolutions:

<u>RESOLVED</u>, that the attached banking resolutions and the agreements contained therein are hereby approved and shall be attested to by the appropriate official of the Peninsula Airport Commission.

Commissioner Rob Coleman made the above motion, and Commissioner Walter Jubien, Jr. seconded the motion.

Voting yes were:

Rob Coleman, Walter Jubien, Jr, Sharon Scott and George Wallace.

Mr. Wanner also reported that the next regularly scheduled meeting will be held on Thursday, June 22, 2017 at 8:00 a.m. Commissioner George Wallace stated that a nominating committee will be established to present the officers for the July 2017-June 2018 year at this meeting.

There being no further business, the meeting was adjourned at 8:09 a.m.

#### **NEXT MEETING**

The next meeting of the Peninsula Airport Commission will be held on Thursday, June 22, 2017 at 8:00 a.m. in the Banquet Room.

#### RESOLUTION AND AGREEMENT FOR DEPOSIT ACCOUNT 54-6000626 Peninsula Airport Commission Name of Entity EIN Corporation ☐ Government Entity ☐ Sole Proprietorship ☐ Unincorporated Association General Partnership ☐ Non-Profit Corporation ☐ Limited Liability Company ☐ Limited Partnership Other I, the undersigned, hereby certify to BB&T that I am the Secretary (or as applicable, Proprietor, Authorized Partner, Authorized Manager or other Authorized Employee) of the above named Entity duly organized and existing under the laws of the State of VIRGINIA and that the following are resolutions duly adopted by the Entity, and that such resolutions are in full force and effect and have not been amended or rescinded: RESOLVED, that BB&T is hereby designated as a depository institution in which the funds of this Entity may, subject to the rules of BB&T, be deposited by any of its officers, agents or employees; and that any such officer, agent or employee is hereby authorized on behalf of the Entity and in its name to endorse for deposit, whether in demand or time accounts, or for negotiation or collection, any and all checks, drafts, certificates of deposit or any other payment instrument payable to the Entity, which endorsement may be in writing, by stamp or otherwise, with or without signature of the person so endorsing, it being understood that on such items all prior endorsements are guaranteed by the Entity, irrespective of the lack of a guarantee by the Entity; and FURTHER RESOLVED, that any of the individuals listed below (a "Designated Representative") is hereby authorized to open or close any deposit account with BB&T and to authorize those persons ("Authorized Signers") who may execute a BB&T signature card on behalf of the Entity and transact business on such account: Designated Representative (Signature) Printed/Typed Name Title

FURTHER RESOLVED, that BB&T be and is hereby authorized and directed to honor, pay and charge any of the accounts of the Entity, without inquiry to or responsibility for the application of the proceeds thereof, all checks, drafts, or other orders for the payment, withdrawal or transfer of money in the accounts of or to the credit of the Entity, and to honor any authorization for the transfer of funds between different accounts whether oral, by phone or electronic means without inquiry as to the circumstances related thereto and for whatever purpose or to whomever payable, including requests for conversion into cash as well as for deduction from and payment of cash out of any deposit, and whether or not payable to, endorsed or negotiated by or for the credit of any person signing same or any other officer, agent or employee of the Entity, when signed or endorsed by an original or facsimile signature of any ONE Authorized Signer; and

FOR	BANK USE ONLY	
Prepared By	Date	
Center	Bank No.	_ State

Forward to: Centralized Document Scanning Operations M/C 100-99-15-11 FURTHER RESOLVED, that BB&T be and is hereby authorized to honor, receive, or pay any items bearing the signature of any one Authorized Signer even though payment may create an overdraft or even though such items may be drawn or endorsed to the order of such signer for exchange or cashing, or in payment of the individual obligation of such signer, or for deposit to such Authorized Signer's personal account and BB&T shall not be required or be under any obligation to inquire as to the circumstances of the issuance or use of any such item or the application or disposition of such item or the proceeds thereof; and

FURTHER RESOLVED, that the Entity assumes full responsibility and holds harmless BB&T for any and all payments made or any other action taken by BB&T in reliance upon the signatures, including facsimiles thereof, of any Authorized Signer regardless whether or not the use of the facsimile signature was unlawful or unauthorized and regardless of by whom or by what means the purported signature or facsimile signature may have been affixed if such signature reasonably resembles the specimen or facsimile signature of the Authorized Signer; and

FURTHER RESOLVED, that any Designated Representative, or person authorized in writing by a Designated Representative, is authorized to act on behalf of the Entity as follows: obtain information on accounts; appoint, remove or change Authorized Signers; deliver any night depository agreement; enter into any agreement for cash management services; lease a safe deposit box; enter into an agreement for deposit access device; enter into an agreement for credit cards; or enter into other agreements concerning the deposit accounts at BB&T; and

FURTHER RESOLVED, that any and all prior resolutions executed on behalf of the Entity are hereby revoked and that the foregoing resolutions shall remain in full force and effect until the Entity officially notifies BB&T to the contrary in writing. BB&T may conclusively presume that this Resolution and Agreement for Deposit Account and any signature cards executed pursuant hereto are in effect and that persons identified herein are properly authorized to act on behalf of the Entity. The Entity, as changes to the Designated Representatives and/or Authorized Signers are made, will immediately report and certify such changes to BB&T through submission of a new Resolution and Agreement for Deposit Account and/or signature card, as applicable. BB&T 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 the signature of any Designated Representative so certified, or refusing to honor any signature not so certified; and

FURTHER RESOLVED, that all transactions by any officer, employee or agent of the Entity on its behalf and in its name prior to the delivery of this Resolution and Agreement for Deposit Account are hereby ratified and approved.

In Witness Whereof, I have hereunto subscribed	my name and affixed the seal. if any, of this Entity
thisday of	, Year
For Corporations including Non-Profit:	
<b>√</b>	(Seal)
Secretary/Assistant Secretary	
(Corporate Seal)	
For All Other Entities:	
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(Proprietor, Authorized Partner, Authorized Manager,	or other Authorized Person)

BRAT SIGNATURE CARD (VIRGINIA)

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Newport News, 23	602				
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Business, Trust, Ban	kruptcy, Guardian, Custoc	lian, Conservato	r. IOLTA, Escr	ow and "Other"Acc	ounts
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	Robert S. Coleman				
SSN/TIN/EIN	Printed Name				DATE
	E. Renee Ford				
SSN/TIN/EIN	Printed Name				DATE
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	BB&T to obtain any consumer report and/or any other Pers		manufacture .
Please sign beside the Print	ed Name(s) only. If signature line does not h	nave a Printed Name, then a signature is no	t required on that line.
	George E. Wallace		
SSN/TIN/EIN	Printed Name		DATE
	Sanford B. Warner		
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ease sign beside the Pri	inted Name(s) only. If signature line does no	it have a Printed Name, then a signature is n	ot required on that line.
	Walter L. Jubien Jr.		
SSN/TIN/EIN	Printed Name		DATE
	Stephen M. Mallon		
SSN/TIN/EIN	Printed Name		DATE
	Charan D. Santt		
SSN/TIN/EIN	Sharon P. Scott		DATE

#### BB&T SIGNATURE CARD (VIRGINIA) NAME AND ADDRESS OF DEPOSITOR(S) Peninsula Airport Commission 909-Bland Blvd. Newport News, 23602 OWNERSHIP DESIGNATION ACCOUNT NUMBER ACCOUNT OPENING DATE | REVISED CARD DATE Political Subdivision 7981 Approved By Branch Location IDENTIFICATION (Primary Account Holder) \_\_\_\_ Issued By VA\_\_\_ ID Number \_\_\_ \_\_\_ Expiration Date \_\_\_\_ \_\_\_ Oate of Birth \_\_\_\_ - Issued By \_\_\_\_ \_\_\_ ID Number\_\_ Expiration Date Cell Phone Number (\_\_\_\_) \_\_\_\_ Home Phone Number (\_\_\_\_) \_\_\_ Address as listed on ID \_\_ Work Phone Number ( ) IDENTIFICATION (Secondary Account Holder) \_\_\_ Issued By \_\_\_\_\_ ID Number\_\_ Expiration Date \_\_\_\_\_ \_\_\_\_ Date of Birth \_\_\_ Second Type of ID\_\_\_\_\_\_ ISsued By \_\_\_\_\_\_ ID Number \_\_\_\_\_ Expiration Date Cell Phone Number ( \_\_\_\_\_) \_\_\_\_ \_\_\_\_ Home Phone Number ( \_\_\_\_\_) \_\_\_ Work Phone Number (\_\_\_\_)\_ Address as listed on ID. IN CERTIFICATION Under penalties of perjury, I certify by my signature below that: (1) The number shown on this form is the correct Social Security or Tax identification Number, or I am waiting for a number to be issued to me, and (2) I am NOT subject to backup withholding either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service has notified me that I am no longer subject to backup withholding. (Depositor must cross out (2) above if the IRS has notified the depositor that the depositor recurrently subject to backup withholding because of underreporting of interest or dividends.), (3) I am a U.S. person (including U.S. resident alien), and (4) the FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. (Applies to accounts maintained outside the U.S.) The Internal Revenue Service does not require your consent to any provision of this document other than the certification required to avoid backup Check one only if applicable: Depositor is an exempt recipient of interest under the Internal Revenue Code. complete a separate W-8,

Depositor is exempt as a non-resident alien and has completed a Form W-8 (required for interest bearing accounts only). Each non-resident alien depositor must

I understand that if a taxpayer identification number is not provided to the bank within 60 days, the account may be closed.

BY MY SIGNATURE, I HEREBY CERTIFY THAT: (1) the type of ownership designated is correct; (2)(a) if I have opened a personal account, I have received the "Bank Service Agreement", the "BB&T Interest Rate Schedule" or Client Summary with interest rates, and the "BB&T Personal Services Pricing Guide" and agree to accept the terms of each document; or (2)(b) if I have opened a commercial account, I have received the "Commercial Bank Services Agreement" or "Institutional Bank Services Agreement" and the "BB&T Business Services Pricing Guide" and agree to accept the terms of each document; (3) I give permission to BB&T to verify any bank or credit references, and (4) I have read and understand this signature card, confirm that it is completed correctly and agree to its terms and disclosures

#### The undersigned expressly authorize BB&T to obtain any consumer report and/or any other Personal or Business credit repor Please sign beside the Printed Name(s) only, If signature line does not have a Printed Name, then a signature is not required on that line. Robert S. Coleman SSN/TIN/EIN Printed Name DATE E. Renee Ford SSN/TIN/EIN DATE Printed Name

Business, Trust, Bankruptcy, Guardian, Custodian, Conservator, IOLTA, Escrow and "Other"Accounts

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	George E. Wallace		
SSN/TIN/EIN	Printed Name		DATE
	Sanford B. Warner		
SSN/TIN/EIN	Printed Name		DATE
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		vator, IOLTA, Escrow and "Other"Ac	counts
The undersigned expressly authorize BB8	To obtain any consumer report and/or any other Per	sonal or Business credit reports	
Please sign beside the Printed	Name(s) only. If signature line does not	have a Printed Name, then a signature is no	ot required on that line
Wal	ter L. Jubien Jr.		
SSN/TIN/EIN	Printed Name		DATE
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Sha	ron P. Scott		
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# BB&T SIGNATURE CARD (VIRGINIA) NAME AND ADDRESS OF DEPOSITOR(S) Peninsula Airport Commission 900 Bland Blvd. Newport News, 23602 ACCOUNT OPENING DATE | REVISED CARD DATE ACCOUNT NUMBER OWNERSHIP DESIGNATION 8007 Political Subdivision Approved By Opened/Updated By IDENTIFICATION (Primary Account Holder) Issued By VA ID Number \_\_\_ Expiration Date \_\_\_\_ Second Type of ID\_\_\_\_\_ Issued By \_\_\_\_\_\_ ID Number \_\_\_\_ \_\_\_ Expiration Date \_ Gell Phone Number (\_\_\_\_) \_\_\_\_ Home Phone Number (\_\_\_\_) \_\_ Work Phane Number (\_\_\_\_) \_\_\_ Address as listed on ID IDENTIFICATION (Secondary Account Holder) Issued By \_\_\_\_\_ ID Number \_\_\_ Expiration Date Date of Birth Second Type of ID\_\_\_\_\_\_ Issued 8y\_\_\_\_\_ ID Number\_\_\_\_\_ \_\_\_ Expiration Date \_ Cell Phone Number (\_\_\_\_) \_\_\_\_ Home Phone Number (\_\_\_\_) \_ Employer \_\_\_\_ Work Phone Number ( \_\_\_\_) \_\_\_ Address as listed on ID IN CERTIFICATION Under penalties of perjury, I certify by my signature below that: (1) The number shown on this form is the correct Social Security or Tax Identification Number, or I am waiting for a number to be issued to me, and (2) I am NOT subject to backup withholding either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service has notified me that I am no longer subject to backup withholding. (Depositor must cross out (2) above if the IRS has notified the depositor that the depositor is currently subject to backup withholding because of underreporting of interest or dividends.), (3) I am a U.S. person (including U.S. resident alien), and (4) the FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. (Applies to accounts maintained outside the U.S.) The internal Revenue Service does not require your consent to any provision of this document other than the certification required to avoid backup withholding. Check one only if applicable: Depositor is an exempt recipient of interest under the Internal Revenue Code. Depositor is exempt as a non-resident alien and has completed a Form W-8 (required for interest bearing accounts only). Each non-resident alien depositor must complete a separate W-8. I understand that if a taxpayer identification number is not provided to the bank within 60 days, the account may be closed, BY MY SIGNATURE, I HEREBY CERTIFY THAT: (1) the type of ownership designated is correct; (2)(a) if I have opened a personal account, I have received the "Bank Service Agreement", the "BB&T Interest Rate Schedule" or Client Summary with interest rates, and the "BB&T Personal Services Pricing Guide" and agree to accept the terms of each document; or (2)(b) if I have opened a commercial account, I have received the "Commercial Bank Services Agreement" or "Institutional Bank Services Agreement" and the "BB&T Business Services Pricing Guide" and agree to accept the terms of each document; (3) I give permission to 8B&T to verify any bank or credit references, and (4) I have read and understand this signature card, confirm that it is completed correctly and agree to its terms and disclosures Business, Trust, Bankruptcy, Guardian, Custodian, Conservator, IOLTA, Escrow and "Other" Accounts ndersigned expressly authorize BB&T to obtain any consumer report and/or any other Personal or Business credit report Please sign beside the Printed Name(s) only. If signature line does not have a Printed Name, then a signature is not required on that line.

DATE

DATE

SSN/TIN/FIN

Robert S. Coleman

E. Renee Ford

Printed Name

Printed Name

ACCOUNT NUMBER	OWNERSHIP DESIGNATION	ACCOUNT OPENING DATE	REVISED CARD DATE
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he undersigned expressly authorize	ruptcy, Guardian, Custodian, Consere BB&T to obtain any consumer report and/or any other Peter BB&T to obtain any consumer report and/or any consumer report	rsonal or Business credit reports	
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	Sanford B. Warner		
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N CERTIFICATION		
Bank Service Agreement", the accept the terms of each doct ank Services Agreement" and ank Services Agreement" and accept the services agreement and accept the services accept the services accept the accept the services accept the services	e "BB&T Interest Rate Schedule" or Client Sum ument; or (2)(b) if I have opened a commercia d the "BB&T Business Services Pricing Guide";	designated is correct; (2)(a) if I have opened a personal account, I have received I mary with interest rates, and the "BB&T Personal Services Pricing Guide" and agree account, I have received the "Commercial Bank Services Agreement" or "institution and agree to accept the terms of each document; (3) I give permission to BB&T to verie card, confirm that it is completed correctly and agree to its terms and disclosures.
Rusiness Trust Rank	ruptcy Guardian Custodian Cons	ervator, IOLTA, Escrow and "Other"Accounts
he undersigned expressly authoriz	re BB&T to obtain any consumer report and/or any other	Personal or Business credit reports
lease sign beside the Pri	nted Name(s) only If signature line does	ot have a Printed Name, then a signature is not required on that line.
	Walter L. Jubien Jr.	
SSN/TIN/EIN	Printed Name	DATE
	Stephen M. Mallon	
SSN/TIN/EIN	Printed Name	DATE
	Sharon P. Scott	
SSN/TIN/EIN	Printed Name	DATE

BB&T SIGNATURE CARD (VIRGINIA)

	DDAT SIGNATORE C	VUICE TAILSOUAL	<u> </u>	
NAME AND ADDRESS OF DE	EPOSITOR(S)			
Peninsula Airport Com	mission			
900 Bland Blvd.				
Newport News, 23602				
ACCOUNT NUMBER	OWNERSHIP DESIGNATION		ACCOUNT OPENING DATE	REVISED CARD DATE
8120	Political Subdivision		ACCOUNT OFENING DATE	REVIOLD CARD DATE
Openedii Indated Bir	<20000	-40	December 1	
Opened/Updated By		ved Sy	Branch Location	
		N (Primary Account Holder		
	ByVAID Number		Expiration Date	Date of Birth
Second Type of ID Iss	sued By ID Number		Expiration Date	
Employer		Cell Phone Number	() Home Pho	ne Number ()
			Work Phor	
		(Secondary Account Holde		\
T				Data of Birth
	/ ID Number			
second Type of IU Iss	sued By ID Number	-	Expiration Date	
Employer		Cell Phone Number	( Home Pho	ne Number {}
Address as listed on ID			Work Phor	ne Number ()
TIN CERTIFICATION				
Number, or I am waiting for a nu subject to backup withholding a subject to backup withholding. ( withholding because of underre	riffy by my signature below that: (1) I amber to be issued to me, and (2) I and a result of a failure to report all inte (Depositor must cross out (2) above porting of interest or dividends.), (3) and I am exempt from FATCA reporting	n NOT subject to back erest or dividends, or if the IRS has notified I am a U.S. person (in	tup withholding either because I the Internal Revenue Service has I the depositor that the deposito Including U.S. resident alien), and	have not been notified that I am notified me that I am no longer r is currently subject to backup (4) the FATCA code(s) entered
The Internal Revenue Service of withholding.	does not require your consent to an	y provision of this d	ocument other than the certifica	ation required to avoid backup
withnolding. Check one only if applicable:				
Depositor is an exempt recipie Depositor is exempt as a non- complete a separate W-8,	ent of interest under the Internal Revenu resident alien and has completed a For Ulfication number is not provided to the b	π W-8 (required for inte		non-resident alien depositor must
"Bank Service Agreement", the "Bl accept the terms of each docume Bank Services Agreement" and the	CERTIFY THAT: (1) the type of owner B&T Interest Rate Schedule" or Client nt; or (2)(b) if I have opened a comme e "BB&T Business Services Pricing Guid (4) I have read and understand this sign	Summary with interest r rcial account, I have re de" and agree to accept	ates, and the "BB&T Personal Serviceived the "Commercial Bank Serviceived the "Commercial Bank Serviceived the terms of each document; (3) I	ices Pricing Guide" and agree to rices Agreement" or "Institutional give permission to BB&T to verify
	tcy, Guardian, Custodian, Co &T to obtain any consumer report and/or any o			ounts
lease sign beside the Printed	Name(s) only. If signature line doe	es not have a Printed	Name, then a signature is not	required on that line.
	and C. Calerra			
SSN/TIN/EIN Rob	pert S. Coleman Printed Name			DATE
2 00 0 1 1 1 1 to 10 1 T				DATE
E. R	enee Ford			

DATE

SSN/TIN/EIN

Printed Name

ACCOUNT NUMBER	OWNERSHIP (			ACCOUNT OPENING DATE	REVISED CARD DATE
8120	Political Su				<u> </u>
Opened/Updated By		Approved By		Branch Locate	Mi
		IDENTIFICATION (Seco	,	•	
				Expiration Date	Date of Birth
Second Type of ID				Expiration Date	
Employer			all Phone Number	() Home Ph	
Address as listed on ID		IDENTIFICATION (Secon		er)	one Number ()
Type of ID (ssue				Expiration Date	Date of Birth
Second Type of ID	- Issued By			Expiration Date	
Employer			Cell Phone Number	() Hame Pl	
Address as listed on ID		IDENTIFICATION (Secon	ndary Account Holds	Work Ph	one Number ()
		ber		Expiration Date	Date of Birth
Second Type of ID	Issued By	ID Number		Expiration Date	
mployer				r () Home Pl	hone Number ()
Address as listed on ID				Work Ph	one Number ()
withholding because of unde on this form (if any) indicatin The Internal Revenue Servic	erreporting of interest g that I am exempt fro	or dividends.), (3) I am om FATCA reporting is c	a U.S. person (i orrect. (Applies	d the depositor that the deposit ncluding U.S. resident alien), an to accounts maintained outside document other than the certifi	d (4) the FATCA code(s) entere the U.S.)
withholding. Check one only if applicable:					,
Depositor is an exempt red Depositor is exempt as a r	on-resident alien and h			erest bearing accounts only). Each	non-resident alien depositor mus
complete a separate W-8, understand that if a taxpayer is		not provided to the bank v	vithin 60 days, the	e account may be closed	
"Bank Service Agreement", the accept the terms of each doct Bank Services Agreement" and	e "BB&T Interest Rate S iment; or (2)(b) if I hav I the "BB&T Business S	Schedule" or Client Summ e opened a commercial a Services Pricing Guide" an	nary with interest a account, I have read ad agree to accep	rect; (2)(a) if I have opened a per- rates, and the "BB&T Personal Se- seceived the "Commercial Bank Se it the terms of each document; (3) at it is completed correctly and agre	rvices Pricing Guide" and agree to rvices Agreement" or "Institutional Ligive permission to BB&T to verif
(*)					
3usiness, Trust, Bankr	uptcy, Guardian,	Custodian, Conse	rvator, IOLTA	A, Escrow and "Other"Ac	counts
he undersigned expressly authorize					
lease sign beside the Prin	ted Name(s) only lf	signature line does no	t have a Printed	d Name, then a signature is no	ot required on that line.
	George E. Wal	lace			
SSN/TIN/EIN	Printed Name				DATE
	Sanford B. Wa	rnor			
SSN/TIN/EIN	Santord B. Wa				DATE
	i ilikuu Naile				DATE
SSN/TIN/EIN	Printed Name	77 19			DATE

ACCOUNT NUMBER	OWNERSHIP DESIGNATION Political Subdivision	ACCOUNT OPENING DATE REVISED CARD DATE
0120	Folitical Subdivision	
Opened/Updated By	Approved B	y Branch Location
		ondary Account Holder)
		Expiration Date Date of Birth
		Expiration Date
		dell Phone Number () Home Phone Number ()
Address as listed on ID	IDENTIFICATION (Sec	ondary Account Holder) Work Phone Number ()
		Expiration Date Date of Birth
second Type of ID	Issued By IO Number	Expiration Date
mployer		Cell Phone Number () Home Phone Number ()
Address as listed on IO	IDENTIFICATION (Sec	Work Phone Number () ondary Account Holder)
		Expiration Date Date of Birth
Second Type of ID	Issued By ID Number	Expiration Dale
mployer	=======================================	Cell Phone Number         ( )
Address as listed on ID		Work Phone Number ()
complete a separate W-8, understand that if a taxpayer id ay MY SIGNATURE, I HEREB Bank Service Agreement!" He cocept the terms of each docur Bank Services Agreement" and	entification number is not provided to the bank Y CERTIFY THAT: (1) the type of ownership "B8&T Interest Rate Schedule" or Client Sumr nent; or (2)(b) if I have opened a commerciant he "B8&T Business Services Pricing Guide"	8 (required for interest bearing accounts only). Each non-resident alien depositor must within 60 days, the account may be closed.  designated is correct; (2)(a) if I have opened a personal account, I have received the nary with interest rates, and the "BB&T Personal Services Pricing Guide" and agree to account, I have received the "Commercial Bank Services Agreement" or "Institutional and agree to account the terms of each document; (3) I give permission to BB&T to verify e card, confirm that it is completed correctly and agree to its terms and disclosures.
	uptcy, Guardian, Custodian, Conse BBRT to obtain any consumer report and/or any other f	ervator, IOLTA, Escrow and "Other"Accounts Personal or Business credit reports
·	,,,,,	ot have a Printed Name, then a signature is not required on that line.
SSN/TIN/EIN	alter L. Jubien Jr.	D. 176
2011/   IIV/EIIV	Prinled Name	DATE
	tephen M. Mallon	
SSN/TIN/EIN	Prinled Name	DATE
SI	naron P. Scott	
SSN/TIN/EIN	Printed Name	DATE

# **AUTHORIZATION RESOLUTION**

By:

VIRGINIA  Peninsula Airport a meeting of the Board These resolutions appear in	Federal Employer I.D. N Commission and that of Directors Members duly and the minutes of this meeting and the	Other Political Subdivision Number 54-6000626 at the resolutions on this document at properly called and held on	_, engaged in business under the trade name re a correct copy of the resolutions adopted at (date).
	elow, subject to any written limita nd Title or Position	tions, is authorized to exercise the po Signature	wers granted as indicated below: Facsimile Signature (if used)
A. Robert S. Coleman,	Commissioner		
B. E. Renee Ford, Direc	ctor of Finance		
c Walter L. Jubien, Jr.	Commissioner		
D. Stephen M. Mallon,	Commissioner		
E. Sharon P. Scott, Cor	mmissioner		
F. George E. Wallace, G. Sanford B. Wanner, Interi POWERS GRANTED (Attach	m Executive Director	r by placing the letter corresponding	to their name in the area before each power.
Indicate A,B,C, D,E and or F A,C,D,E,F A,C,D,E,F A,B,C,D,E,F,G  A.C.D.E.F A,C,D,E,F	<ol> <li>Exercise all of the powers li</li> <li>Open any deposit of share is</li> <li>Endorse checks and orders if this Financial Institution.</li> <li>Borrow money on behalf and deliver promissory notes on the propert sums borrowed, and to disconegotiated or discounted and payment</li> <li>Enter into a written lease for Box in this Financial Institution.</li> </ol>	account(s) in the name of the Pening of the payment of money or otherwind in the name of the Peninsula Airport other evidences of indebtedness. Ortgage or pledge bills receivable, way now owned or hereafter owned or a ount the same, unconditionally guarant to waive demand, presentment, por the purpose of renting, maintaining	se withdraw or transfer funds on deposit with sign, execute and rehouse receipts bills of lading, stocks, bonds, acquired by the Corporation as security for
LIMITATIONS ON POWERS EFFECT ON PREVIOUS RESO effect.  CERTIFICATION OF AUTHOR Commission have, a and to confer the powers g	The following are the express limical process of the second supersection of the second supersection of the second at the time of adoption of this results.	Board of Directors Managers or De resolution had, full power and lawful have full power and lawful authority	f not completed, all resolutions remain in esignated Members of Peninsula Airport authority to adopt the foregoing resolutions

(Note: In the case the Certifying individual is designated by the resolutions as one of the signings officer (members), this certificate must also be signed by a second officer/member.



# **Deposit Account Resolution and Authorization for Business Entities**

l.	Business Entity Account Information Name	Business Type
	Peninsula Airport Commission	Other
	Governed By Taxpayer ID Number	Date Resolution and Authorization Adopted
	Board of Commissioners 54-6000626	Date Resolution and Authorization Adopted
	Account Number(s)	
	Account Number(s)	
	The undersigned in Section IX or X hereby certify to SunTrust E existing under the laws of the State of the manner prescribed by law and is currently in full compliance existence under applicable law.	Bank ("Bank") that the above named Business Entity is organized and VIRGINIA and has been registered in with all requirements relating to its organization and continued
	Bank and any additional Accounts opened in the future in the n authorization, Accounts will include any certificates of deposit ir authorizations shall remain in full force and effect until written n modification certified by the appropriate authorized individual(s) Bank has had a reasonable time to act on said change. Receip and Bank shall be held harmless from any claims, demands, ex	n the name of the Business Entity. These resolutions and otice in a form acceptable to the Bank of their rescission or applicable to the Business Entity has been received by Bank and the tof such notice shall not affect any action taken by Bank prior thereto openses, loss, or damage resulting from, or growing out of, honoring and in these resolutions to sign by delegation of authority in accordance
II.	for the Business Entity; that any one of the individuals or entitie authorized to act, give instructions, access information, use Barwith respect to any Accounts of Business Entity with Bank or see of the Business Entity any of Bank's agreements including checkinght deposit, cash management or other treasury management counter foreign currency transactions, agreements and transfer to act, give instructions, access information, use Bank's services Business Entity, including agreements that delegate his or her attity's Accounts or Bank's services; that the Business Entity is Bank's Rules and Regulations for Deposit Accounts related the Authorized Signer named in Section III, is authorized on behalf or collection, any and all checks, drafts, certificates of deposit, apayment of money payable by or to the order of this Business Entity	Entity. Resolved, that Bank be and is hereby designated a depository is named in Section III below is an "Authorized Signer" and is nk's services, and perform transactions on behalf of Business Entity ervices provided to Business Entity by the Bank, to enter into on behalf cking, savings, certificates of deposit, wire or electronic funds transfer, at services agreements, or foreign exchange and other over-these, and to delegate to any other individual or entity his or her authority as, perform transactions, and enter into agreements on behalf of the authority to other individuals or entities with respect to the Business hall be bound by the terms and conditions of all such agreements and areto, all as now existing or as amended from time to time; and that any of this Business Entity to sign and to endorse for deposit, negotiation savings certificates, items or other instruments or written orders for the Entity. Signatures and endorsements, if any, may be in writing, by ature of the person so endorsing, it being understood that all prior
	circumstances of the issuance or application of the proceeds Business Entity's Accounts with Bank, whether payable to, end	charge to the Accounts of this Business Entity, without inquiry as to the sof, any checks, drafts, items or other written orders on any of this lorsed or negotiated by or for the credit of any person signing the same en signed by any of the Authorized Signers named in Section III.
III.		rnors authorized to act, give instructions, access information, ements, and delegate authority on behalf of the Business Entity
	The full name, title, and signature of each person authorize perform transactions, enter into agreements, and delegate his resolutions set forth in this document is immediately below. [In (e.g., a corporation, LLC, or partnership), the name of the entir Partner, Member or Manager is entered in the column headed	d to act, give instructions, access information, use Bank's services, sor her authority on behalf of the Business Entity as described in the struction: If the General Partner, Member or Manager is also an entity ty is entered in the column headed "Name", applicable title of General described "Title", and the name of the individual signing on behalf of that entity haded "Signature" and the individual signs directly underneath his/her
	User ID	Account Number

	Name	Title	Signature		
	Robert S. Coleman	Commissioner			
	Sanford B. Wanner	Executive Director			
	Walter L. Jubien Jr.	Commissioner			
	Shephen M. Mallon	Commissioner			
	Sharon P. Scott	Commissioner			
	George E. Wallace	Commissioner			
IV.	Facsimile Signatures (Complete this section only if machine or facsimile stamped signatures are to be used on items.) Further Resolved, that Bank is hereby requested, authorized and directed to honor any check, draft, item or other written order on any of this Business Entity's Accounts with Bank when bearing or purporting to bear the following authorized machine or facsimile signature of any of the above named individuals whose signatures are reproduced below, regardless of by whom or by what means the actual or purported machine or facsimile signatures may have been affixed. The Business Entity shall indemnify and hold the Bank harmless from any and all claims, expenses, losses, damages and costs, including attorneys' fees, resulting from, or growing out of the Bank's honoring the facsimile signature of any of the following individuals, its refusal to honor any facsimile signature of an individual not named below, or resulting from the unauthorized use of the instrument used to provide the facsimile signatures by persons other than authorized individuals.				
	Name of Authorized Signer Listed in Se	ection III Machi	ine/Facsimile Stamped Signature of Authorized Signer		
V.	Additional Signatories on Business Entity's Accounts. Further resolved, the following individual(s) are authorized as additional signatories only to sign and to endorse for deposit or collection any checks, drafts, or other instruments or written orders for the payment of money payable to the order of the Business Entity and to sign checks, drafts, items or other written orders, and initiate wire or funds transfers and execute Bank's Funds Transfer Authorization wire request and disclosure form on any of the Business Entity's Accounts with Bank. [Instruction: If an additional signatory is not authorized to sign on all Accounts, specify the Account Number applicable to the signatory as indicated below.] Refer to the Signature Card(s) on the Account(s) for signatures of the Additional Signatories.				
	Additional Signatory's Name Pos	S	Specific Deposit Account Number(s) Applicable to Signatory (Complete only if signatory is not authorized on all accounts)		
VI.	Qualification Certification for Public Fun Association or Corporation Not Operate		Organization, Homeowners and Condominium Owners on a checking account (NOW Account)		
	Negotiable Order of Withdrawal or NOW A Public Fund or a Non-Profit Organization of other similar purposes under one of the fol Revenue Code (26 USC (IRC 1954) 501 (	med Business Entity is eligib Account) in compliance with that is operated primarily for Ilowing sections: Organization C) (3) – (13) and (19). Politic	terest on a checking account. ble to earn interest on a checking account (referred to as a Regulation D of the Federal Reserve Act (12CFR 204) as a r Religious, Philanthropic, Charitable, Educational, Political of on – Section 501 (C) (3) through (13), and (19) of the Interna cal <u>Organization</u> – Section 527 of the Internal Revenue Code (35)		
VII.	<b>Power to Act.</b> The undersigned certifies that the resolutions stated herein are accurate provisions of the organizational instruments	ate and that this Deposit Acco s, which include the Business	undersigned's powers to adopt this Authorization and to attest count Resolution and Authorization is in conformity with the s Entity's charter, bylaws, operating agreement, partnership e Business Entity or the undersigned party may be bound and		
			rovided for above are hereby approved and ratified.		
IX.	Certification—Corporation or Profession	nal Corporation, I, the unders	rsigned, hereby certify to Bank that the above is a true copy of		
			olutions and authorizations are in full force and effect and		
	resolutions and authorizations of said Busir have not been amended or rescinded.				

Certification—Limited Liability Company, Partnership, Association, or Other Entity. I/We, the undersigned, he authorizations of said Business Entity and that such resolut [Instruction: If the General Partner, Member or Manager is entity and the word "By" are entered in the column header below the name of the entity; and the name of the individua The individual must provide a resolution on that entity reflect Name and Title  Robert S. Coleman, Commissioner  Walter L. Jubien, Jr., Commissioner  Stephen M. Mallon, Commissioner  Sharon P. Scott, Commissioner	ereby certify to Bank that the above ions are in full force and effect and ha also an entity (e.g., a corporation, L d "Signature"; the individual signing of I and individual's title or position are e	Corporation's Bylaws , Unincorporated Organization e is a true copy of resolutions are ave not been amended or rescinde LC, or partnership), the name of the on behalf of that entity signs direct
Certification—Limited Liability Company, Partnership, Association, or Other Entity. I/We, the undersigned, he authorizations of said Business Entity and that such resolut [Instruction: If the General Partner, Member or Manager is entity and the word "By" are entered in the column header below the name of the entity; and the name of the individua The individual must provide a resolution on that entity reflect Name and Title  Robert S. Coleman, Commissioner  Walter L. Jubien, Jr., Commissioner  Stephen M. Mallon, Commissioner  Sharon P. Scott, Commissioner	George E. Wallace, Chairman Name and Title of President, Secret Other Officer as designated in the C Public Fund, Sole Proprietorship ereby certify to Bank that the above ions are in full force and effect and he also an entity (e.g., a corporation, L d "Signature"; the individual signing of I and individual's title or position are e ting the individual's authority.]	Corporation's Bylaws , Unincorporated Organization e is a true copy of resolutions are ave not been amended or rescinde LC, or partnership), the name of the on behalf of that entity signs direct entered in the column headed "Title
Certification—Limited Liability Company, Partnership, Association, or Other Entity. I/We, the undersigned, he authorizations of said Business Entity and that such resolut [Instruction: If the General Partner, Member or Manager is entity and the word "By" are entered in the column header below the name of the entity; and the name of the individua The individual must provide a resolution on that entity reflect Name and Title  Robert S. Coleman, Commissioner  Walter L. Jubien, Jr., Commissioner  Stephen M. Mallon, Commissioner  Sharon P. Scott, Commissioner	Name and Title of President, Secret Other Officer as designated in the Computer Public Fund, Sole Proprietorship ereby certify to Bank that the above ions are in full force and effect and had also an entity (e.g., a corporation, Lot "Signature"; the individual signing of I and individual's title or position are esting the individual's authority.]	Corporation's Bylaws , Unincorporated Organization e is a true copy of resolutions are ave not been amended or rescinde LC, or partnership), the name of the on behalf of that entity signs direct entered in the column headed "Title
Association, or Other Entity. I/We, the undersigned, he authorizations of said Business Entity and that such resolut [Instruction: If the General Partner, Member or Manager is entity and the word "By" are entered in the column header below the name of the entity; and the name of the individual The individual must provide a resolution on that entity reflect Name and Title  Robert S. Coleman, Commissioner  Walter L. Jubien, Jr., Commissioner  Stephen M. Mallon, Commissioner  Sharon P. Scott, Commissioner	ereby certify to Bank that the above ions are in full force and effect and hat also an entity (e.g., a corporation, L d "Signature"; the individual signing of I and individual's title or position are enting the individual	e is a true copy of resolutions and ave not been amended or rescinde LC, or partnership), the name of the contract of that entity signs direct entered in the column headed "Title or the column headed".
Walter L. Jubien, Jr., Commissioner  Stephen M. Mallon, Commissioner  Sharon P. Scott, Commissioner		
Stephen M. Mallon, Commissioner Sharon P. Scott, Commissioner		
Sharon P. Scott, Commissioner		
A CONTROL HOUNDAND AND AND AND AND AND AND		
George E. Wallace, Commissioner		
Signature Per	quirement instructions	
ecretary, or other corporate officer as designated in the desolution and Authorization under Section IX. imited Liability Companies: Section III and X require the signagreement authorizes one or more members/managers/board II such authorized members/managers/board members are s	atures of all <b>members/managers/boa</b> l members to conduct banking busine	ard members, unless the Operatin
ublic Fund Entities: Section III requires the signatures of indi- esignated by the governing unit, e.g., Board of County Cor o represent the governing unit is required to certify the Dep	viduals authorized to sign on behalf o mmissioners, Mayor, Secretary of Sta	te, etc. The individual(s) authorized
artnerships: Section III and X require the signatures of <u>all Genore</u> partners to conduct banking business and perform bankinamed in Section III as the <b>General Partners</b> authorized to acceposit Account Resolution and Authorization under Section 2	eneral Partners, unless the Partnersh ing transactions. In such cases, the do to on behalf of the entity and these sal	ip Agreement designates one or esignated general partner(s) are
ole Proprietorships: Section III and X require the signature of ignatures of the husband and wife who own the Business En		of a spousal proprietorship, the
Inincorporated Organizations or Associations: Section III required organization or Association's bylaws or charter as authorized ecretary of the organization or association (or other individual essolution and Authorization under Section X.	to act on behalf of the organization or	association. The President <u>or</u>
k Use Only		
Number Cost Center Number	Cost Center Name Commercial	
ared By Perkins	Phone Number 757-624-5455	Date
ount Number(s)	I I VI VII VII VII VII VII VII VII VII	<u> </u>

- Locations with DCOR scanning software submit with cover sheet via local scanner Locations without DCOR scanning software send to Output Review, FL-Orlando-7021