

State of West Virginia Agency Master Agreement

Order Date: 2022-06-30

CORRECT ORDER NUMBER MUST APPEAR ON ALL PACKAGES, INVOICES, AND SHIPPING PAPERS. QUESTIONS CONCERNING THIS ORDER SHOULD BE DIRECTED TO THE DEPARTMENT CONTACT.

| Order Number: | AMA 1300 1300 STO2000000004 3 | Procurement Folder: 614708 |
|-----------------------|-------------------------------|---|
| Document Name: | Depository Services | Reason for Modification: |
| Document Description: | Depository Services | Change Order No 30 - To renew the contract under the same terms and conditions. |
| Procurement Type: | Agency Master Agreement | |
| Buyer Name: | Shelly Murray | |
| Telephone: | (304) 341-7089 | |
| Email: | shelly.murray@wvsto.com | |
| Shipping Method: | Vendor | Effective Start Date: 2020-06-01 |
| Free on Board: | FOB Dest, Freight Prepaid | Effective End Date: 2023-06-30 |

| | VENDOR | | | | DEPARTMENT CONTACT | | |
|-------|--------------------|---------------|------------|---------------|--------------------|---------------------------|--|
| Vend | lor Customer Code: | 00000017240 | 9 | | Requestor Name: | Alberta Kincaid | |
| HUN | TINGTON NATIONAL I | BANK | | | Requestor Phone: | (304) 341-0723 | |
| 500 L | LEE ST E 14TH FLR | | | | Requestor Email: | alberta.kincaid@wvsto.com | |
| CHA | RLESTON | | WV | 25301 | | | |
| US | | | | | | | |
| Vend | lor Contact Phone: | 999-999-9999 | Extension: | | | | |
| Disco | ount Details: | | | | | | |
| | Discount Allowed | Discount Perd | entage | Discount Days | | | |
| #1 | No | 0.0000 | | 0 | | | |
| #2 | No | | | | | | |
| #3 | No | | | | | | |
| | | • | • | <u> </u> | | | |

| INVOICE TO | | SHIP TO | | |
|------------|----------|--|----------|--|
| | | WEST VIRGINIA STATE TREASURERS OFFICE 322 70TH ST SE | | |
| CHARLESTON | WV 25304 | CHARLESTON | WV 25304 | |
| US | | us | | |

Page: 1

| Total Order Amount: | Or | oen End |
|----------------------------|----------|---------|
| | <u> </u> | |

DEPARTMENT AUTHORIZED SIGNATURE

SIGNED BY: Bryan Archer

DATE: 2022-06-30

ELECTRONIC SIGNATURE ON FILE

Extended Description:

Change Order

Change Order No. 30 is issued to renew the original contract according to all terms, conditions, prices and specifications contained in the original contract including all authorized change orders.

Effective date of renewal: 7/1/2022 - 6/30/2023

No other changes.

| Line | Commodity Code | Manufacturer | Model No | Unit | Unit Price |
|------|----------------|--------------|----------|------|------------|
| 1 | 84121500 | | | MO | \$0.00 |
| | | | | | |
| | Service From | Service To | | | |

Commodity Line Description: Banking and investment

Extended Description:

Depository/Banking Services per Attached List of Fees

 Date Printed:
 Jun 30, 2022
 Order Number:
 AMA
 1300
 1300
 STO20000000004
 3
 Page:
 2
 FORM ID: WV-PRC-AMA-002 2020/05

| | Document Phase | Document Description | Page 3 |
|--------------|----------------|----------------------|-----------|
| STO200000004 | Final | Depository Services | |



State of West Virginia

RILEY MOORE STATE TREASURER OFFICE OF THE STATE TREASURER PHONE: 304-558-5000 or 1-800-422-7498 www.wvtreasury.com

STATE CAPITOL ROOM E-145 1900 KANAWHA BOULEVARD, EAST CHARLESTON WV 25305

May 24, 2022

Ms. Jennifer Parsons **Huntington National Bank** 500 Lee Street East 14th Floor Charleston, WV 25301

Subject: AMA STO2000000004 / STO91E Depository Services / Change Order #30 Renewal

The West Virginia State Treasurer's Office is offering to renew subject contract under the same terms, conditions and pricing as contained in the original agreement including all authorized change orders. The renewal dates are 07/01/2022 through 06/30/2023. If your company agrees to this renewal. please sign below and return to my attention as soon as possible for processing. Also, please provide your current required insurance certificates.

Should you have any questions about this letter, please feel free to give me a call.

Very truly yours,

Shelly Murray, CPPB

Deputy Treasurer of Purchasing West Virginia State Treasurer's Office

Phone: 304-341-7089

Email: shelly.murray@wvsto.com / purchasing@wvsto.com

We agree to renew the contract for the period as stated above under the same terms and conditions in the original purchase order and any change orders thereto.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/02/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT NAME: PRODUCER Marsh USA, Inc. PHONE FAX (A/C, No) 1166 Avenue of the Americas E-MAIL No. Ext New York, NY 10036 ADDRESS: INSURER(S) AFFORDING COVERAGE NAIC# CN101755263--GAWU-22-23 20508 INSURER A: Valley Forge Insurance Company INSURED Huntington Bancshares Incorporated N/A INSURER B : N/A 41 South High Street N/A INSURER C: N/A Columbus, OH 43287 INSURER D : INSURER E : INSURER F : **COVERAGES CERTIFICATE NUMBER:** NYC-011109858-02 **REVISION NUMBER: 2** THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR POLICY EFF POLICY EXP TYPE OF INSURANCE POLICY NUMBER LIMITS INSO WVD X | COMMERCIAL GENERAL LIABILITY 7012206665 05/01/2022 05/01/2023 2,000,000 **EACH OCCURRENCE** DAMAGE TO RENTED CLAIMS-MADE X OCCUR 2,000,000 S PREMISES (Ea occurrence) 5.000 MED EXP (Any one person) S 2.000,000 PERSONAL & ADV INJURY GEN'L AGGREGATE LIMIT APPLIES PER 4,000,000 GENERAL AGGREGATE ŝ X POLICY PRO-4,000,000 PRODUCTS - COMP/OP AGG | \$ OTHER S COMBINED SINGLE LIMIT (Ea accident) **AUTOMOBILE LIABILITY** S ANY AUTO BODILY INJURY (Per person) S OWNED AUTOS ONLY HIRED SCHEDULED AUTOS NON-OWNED BODILY INJURY (Per accident) S PROPERTY DAMAGE (Per accident) AUTOS ONLY S AUTOS ONLY S **UMBRELLA LIAB** OCCUR EACH OCCURRENCE S **EXCESS LIAB** CLAIMS-MADE AGGREGATE S RETENTIONS DED \$ WORKERS COMPENSATION STATUTE AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT NIA (Mandatory in NH) E.L. DISEASE - EA EMPLOYEE'S yes, describe under ESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT | S DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Evidence of Insurance re: AMA STO913 Depository Services / Change Order #23 CERTIFICATE HOLDER CANCELLATION State of West Virginia SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE Office of the State Treasurer THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN Deputy Treasurer of Purchasing ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE

Marsh USA Inc.